

2014 Arcadia Reimbursement form

Date submitted:	
TOTAL amount to be reimbursed:	
Name of Arcadian (or other) to whom the check will be written:	

Process:

1. complete this form
2. sign it **and** have the convener or other designated member of the Work Group sign it
3. attach the receipts
4. and drop it into the slot in the Common House office door. Thanks!

Each Work Groups has a budget so please list the Work Group (WG). **You must submit receipts to be reimbursed.**

Thank you! There are four Work Groups:

Common Area (CA); Common House (CH); Community Life (CL); Administration (Ad)

Item Description	Vendor:	WG	Budget line item	\$

Reimbursement requests must have at least two signatures, including a member of the Workgroup being charged the expense.

Signature of Person submitting reimbursement request:	Date:
Signature of Workgroup Member or Convenor:	

Thanks again! Checks written ~ 15th of each month. Need it sooner? Contact Susan, Sally or Becky.

-----tear off section for convener if desired (for budget tracking) -----

Check written to:

Item Description	Vendor:	WG	Budget line item	\$