###

## Region F

## Expense Reimbursement Form

This form is to be used to request reimbursement for authorized SWE Region F Section expenditures. Reimbursement is contingent upon adequate funds remaining in the specified budget line. Please complete the information requested and *return it with accompanying original receipts taped to a sheet of 8.5” x 11” paper no later than 60 days after the event* to the SWE Region F Treasurer at:

regionf.treasurer@swe.org

FY14 SWE Region F Treasurer is Cherie Cain

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:**  |  | **Date:** |   |
| **Address:**  |  |  |  |
| **Description of Expense:** | **Date:** | **Amount:** | **Budget Line Item:** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **TOTAL TO BE REIMBURSED:** | **$** |  |
| **Signature:** |  |

## [ ]  Please check here if you would like your reimbursement check to be used as a donation to the Society of Women Engineers Region F. Receipts must be submitted even if donating expenses. You will receive a letter thanking you for your donation and to use for tax purposes.

**For treasurer use:**

Pre-approved by officer contact: Date

Budget review by treasurer: Date

Account #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check #: \_\_\_\_\_\_\_\_\_\_\_\_\_ Date