



PROBUS CLUB OF CAMBRIDGE RIVERSIDE
Request for Reimbursement Form

Date Submitted:	
Cheque Payable to:	
	Print your name
Amount Requested:	
Purpose of Expenditure:	
Items Purchased or Services Rendered:	1.
	2.
	3.
	4.
	If there are more entries needed, please attach a list to this sheet.
Approved by: Probus Treasurer	
	Signature Date

**** NOTE: PLEASE ATTACH ORIGINAL RECEIPT(S) CLEARLY SHOWING THE AMOUNT(S) TO BE REIMBURSED.**

Here's how to use this form:

The cheque will be written to the person, or company whose name appears on the "Cheque Payable to" line above once information has been filled out and approved by Treasurer.

<i>For Treasurer's use only:</i>	
Cheque # paid: _____	Date Paid: _____
Budget Line to be charged: _____	