

Tibetan Association of Santa Fe Reimbursement Form

You must have receipt(s)/statement(s). This form has to be filled out completely in order to be reimbursed.

To Be Filled By Payee/Purchaser

Purchased By: _____ **Amount:** _____

Items Purchased: _____

Purpose: _____

Signature: _____ **Date:** _____

Verified By: _____
Name Signature Date

To Be Filled By Accountant & Treasurer/President – President can only sign checks in Treasurer’s absence

Check #: _____ **Payment #** (must match accounting system): _____ **Check if Entered in the System#:**

Accountant Approval: _____
Name Signature Date

Treasurer Approval: _____
Name Signature Date

Please attach receipts – they should be glued or taped fully to this form. Use the space below or the back.