

**Telaraña Weavers & Spinners Guild
Expense Reimbursement Form**

Name: _____ Date _____

Phone # _____ Committee: _____

Amount of money to reimburse: \$ _____

What the money is for (example: stamps, copies): _____

NOTE: Attach receipt(s) to this form and return to the treasurer.

For Treasurer's use:

Check # _____ Date Issued _____

**Telaraña Weavers & Spinners Guild
Expense Reimbursement Form**

Name: _____ Date _____

Phone # _____ Committee: _____

Amount of money to reimburse: \$ _____

What the money is for (example: stamps, copies): _____

NOTE: Attach receipt(s) to this form and return to the treasurer.

For Treasurer's use:

Check # _____ Date Issued _____