

# **EGA Great Lakes Region**

## **Reimbursement Request/Income Reporting**

Submitted by: Name	Date:
Address:	
Telephone:	Email address:
<i>If different from above, make check payable to:</i>	

Category <i>(use abbrevs below)</i>	Purpose of Expense/Income	Amount <i>(attach receipts)</i>
		<b>TOTAL:</b>

**Categories:** *Use these abbrevs!*

**ADM: Administration** – includes routine expenses such as postage, copying, etc.

**COS: Cost of Sales** – includes shipping and cost of items sold not at a fundraising event

**EE: Educational Events** – includes hospitality costs, course registration fees, advertising, teacher’s fees, etc.

**FRE: Fundraising Events** – includes any related expenses/income

**NEW: Newsletter** – includes production costs, postage, subscriptions, etc.

**OEX: Officer’s Expenses** – list office – includes reimbursement for travel for Officers and representatives

**SAL: Sales** –

**WEB: Website** – includes domain maintenance, host services, related expenses

**OTH: Other** – any category not listed above – please include an explanation

*Use an additional sheet of paper if needed.*

*Mail completed form to current GLR Director. Questions? Email current GLR Treasurer.*

For Treasurer’s Use Only:

Check number \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_