



For Art and Community

www.guildofharwichartists.org

REIMBURSEMENT FORM

Use this form to request reimbursement from the Guild or Gallery for purchases or expenses incurred on behalf of the Guild. Send one copy to Guild of Harwich Artists, P.O. Box 382, Harwich Port, MA 02646; keep one for your records. Include itemized receipts or copies of online orders. Expenditures of more than \$50 requires prior approval from a Guild officer.

Guild Expense Gallery Expense (*Check one*)

Name: _____

Address: _____

Email: _____ Phone: _____

Expense Purpose/ Event:

Itemize expenses as per receipt attached. Add second sheet as needed.

Date: Description: Amount:

Total Amount Requested: _____ Date: _____

Approved by Board Member _____ Date: _____

Check # _____ Ck Date: _____ Date Sent: _____