

# Troop 50 - Springboro, Ohio

## Reimbursement Request



Submitted by: \_\_\_\_\_

Activity/Campout: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Amount to be Reimbursed: \_\_\_\_\_

**FOR TREASURER USE:**

Account:	_____
Check #:	_____

- Please attach receipts to this form
- All expenses must be submitted within 60 days of the event in order to be eligible for reimbursement

**DETAIL OF REIMBURSEMENT**

Item#	Paid to whom?	Description of Purchase	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
<b>TOTAL</b>			

**For Event Coordinators ONLY**

**PARTICIPANTS - FOR COST ALLOCATION**

Total expense for patrol/participants: \_\_\_\_\_

**DRIVERS - FOR MILEAGE REIMBURSEMENT**

Total round trip mileage (min. 50 miles): \_\_\_\_\_

	Name of Participant	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

	Name of Driver	Amount

- All participants in a group signed up for an event will be charged for expenses, whether they show up or not

- Mileage will be the estimated roundtrip mileage between Springboro and the event location
- Drivers will be reimbursed \$.15 per mile which will be deposited in their Troop 50 Account (or their Scout's Account)