

AVON NEWCOMERS CLUB  
EXPENSE REIMBURSEMENT FORM

BOARD/COMMITTEE \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_

PROJECT/EVENT \_\_\_\_\_

DESCRIPTION:	AMOUNT:
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL SUBMITTED (ATTACH RECEIPTS) \$ \_\_\_\_\_

TREASURER: CHECK ISSUED: \_\_\_\_\_ DATE: \_\_\_\_\_

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