

## Legion of Mary

## **SENATUS OF LOS ANGELES**

## REIMBURSEMENT FORM

Name	e:		Title							
	Dates of Payment Methor Expense(s) (Cash, Ck, CC)		-	Purpose of Expenditure(s): Please give detailed reasons for all expenditures.						
#1	Expense(s)	(Casii, Ck, CC)				•				
#2										
#3										
#4										
Sumn	nary of Expenses	;								
	Description (Date, Details, Etc.)		Air/Rail Travel	Ground Trans	Lodging	Meals	Other	Total		
#1										
#2										
#3										
#4										
Expense Report Total										
	l cert	ify these are valic	l Organiz	ation's (no	ot business	s) expens	es.			
Reiml	ourse To:									
Print: Si			ignature:	gnature:				Date:		
I have	e reviewed these	expenses, and I	believe tl	ney are tr	ue and acc	urate.				
	oved By:									
Print:Si			ignature:	gnature:				Date:		