

# Los Altos, Los Altos Hills Newcomers Club Form for reimbursement

Name: \_\_\_\_\_ Total Amount: \_\_\_\_\_

Function: \_\_\_\_\_

Nature of Expense:

Name of vendor(s):

*(Please staple receipts in back of the upper left corner)*

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**Board Approval required for other than budget items.**

Date of Board Approval: \_\_\_\_\_

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**For Treasurer input only:**

Check #: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Notes: