

Where to submit this form and receipts\*: Mail: Scan/Email: Catherine Franczyk 1052 Mattande Lane Naperville, IL 60540

cathfran51@gmail.com

\*Receipts are not required for mileage, but are required for all other expenses.

Name: \_\_\_\_\_

Mailing Address:

Membership (Local League Name): \_\_\_\_\_

ltem	Date(s)	Description & Purpose	Amount
		(For example, "Envelopes to mail dues reminders" or "Name badges for annual meeting")	
Mileage @ 0.50/mi.		(From/to and # miles driven)	
(receipt not required)			
Supplies			
Postage			
Lodging			
Meals			
Other			

Submitted by (signature required): \_\_\_\_\_

**Reimbursement Approved by:** 

Board President

Subt	total:
Voluntary In-Kind Contribution (Subtract): THANK YOU!	
Total to be Reimbu	rsed: