



Richardson Woman's Club
Expense Reimbursement Form

(Fill out completely-Attach receipts and/or invoices to be paid. Sales tax should **not** be included.)

Name: _____ Phone: _____

Address: _____

City: _____ Zip Code: _____

Office/Committee: _____

RWC Event: _____

Reason for Expenditure: _____

Check payable to: _____ Total Amount: _____

Approved by: _____

Committee/ Division Chair

RWC President

FORM MUST BE SIGNED.

This part to be filled out by Treasurer

Date Paid _____

Check No. _____

Category _____