

St. Martin of Tours Parish

7963 S 116th Street, Franklin, WI 53132



Expense Reimbursement Request

Group: _____

Event: _____
i.e. Rummage, Egg Rolls, Craft Fair, Grand March

Date: _____

Expense Reimbursement Amount: _____
Attach supporting receipt(s)

SMOT is exempt from WI sales tax (contact parish bookkeeper for details)

Check payable to: (Please print name)
Address:
City, State, Zip Code:
Phone #:
Email:

Requested by: _____
Signature

Event or Committee
Chairperson Approval: _____
Signature

No expenses shall be paid directly from the cash receipts of an event or fundraiser.