

REIMBURSEMENT FORM

Islamic Community of Bryan-College Station

INSTRUCTIONS

1. For each item, please give as much detail as possible (e.g. item purchased, for which event, etc).
2. Attach proof of payment for each item. Reimbursement will NOT be issued without proof of purchase (such as receipts, invoices, cashed checks).
3. Please write legibly so that the reimbursement processing is not delayed.
4. Expenses that were not pre-approved by ICBCS Board of Directors may not be reimbursed.

CHECK PAYABLE TO: _____

CONTACT EMAIL (reqd.): _____

CONTACT ADDRESS: _____

CONTACT PHONE: _____

DATE SUBMITTED: _____

ITEM DESCRIPTION		AMOUNT	
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
		TOTAL \$	

DATE PROCESSED: _____ CHECK NO: _____ AUTHORIZED BY: _____