



Expense Reimbursement Form

Name _____

Today's Date: _____

Address _____

| Date of Expenditure | Description | Category | Cost |
|---------------------|-------------|----------|------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Total Reimbursement: _____

Categories:

- Annual Meeting
- Administrative
- Bank Fees
- Championships
- Clinic Fees
- Contributions
- Dues
 - National
 - CNER
 - GPC
- Fairgrounds Maintenance
- Fun Activities
- Fundraising
 - Shows
 - Food Booth
- GPC Clothing
- Jr. Board
- Lesson Program
 - Mounted
 - Unmounted
- Rallies
- Ratings
- Refreshments
- Sponsor
- Summer Camp
- Other

DC's approval:
