AJRA Reimbursement Request

Category (Check One): ____Boathouse Maintenance
____Gas
____Coach
____Travel
____Spiritwear

Activity: Regattas: Fall #1____Secret City Spring #1____Talla. Scrimmage
Fall #2____Chattanooga Spring #2____OARS
Fall #3____Head of TN Spring #3____Chatt. Scrimmage
Fall #4____Head of Hooch Spring #4____Dogwood
Spring #5____SE Regional's

Charles____, Spring 2010 Regattas____, Other Regattas _____

Events: (brief description) _____

Please give a general description of the items purchased or monies collected that will be reflected in the receipts that accompany this request, so we may apply to budget line items for your particular activity:

_____

_____

_____

_____

Reimbursement amount requested:_____

Person requesting reimbursement:_____
Address: _____
_____
Phone: _____
Email: _____

Please attach any pertinent receipts with AJRA items and costs circled. Please write your name, event and reimbursement total for that receipt on each individual receipt in case receipts get separated from request form.

For administrative use only:
Date of Receipt: _____
Reimbursement date:_____ AJRA Check #_____
Mailed or Given date: _____

Please mail to: PO BOX 126 Roswell, GA 30077