

LŌKAHI CANOE CLUB PURCHASE / REIMBURSEMENT REQUEST FORM

This form may be used for: Minor purchases and request for reimbursement of previously agreed upon purchased items. DATE: / / NAME OF APPLICANT: Please authorize the following purchases / reimbursement payments for: PURPOSE PAYMENT RECIPIENT (person or vendor): Original payment made by (circle one): CASH / CHECK / BANK TRANSFER ITEM / NAME AND EXPLANATION **AMOUNT** PAID OR REQUESTED (please write a descripton of purchase) TOTAL Invoice to follow Receipt Attached

Date

Authorized Signature