

OFFICER AND COMMITTEE EXPENSE REIMBURSEMENT COVER FORM

NAME OF INDIVIDUAL: _____

POSITION OR COMMITTEE: _____

POSTAGE & SHIPPING {Post Office, UPS, Fed-Ex, mailing services, etc.} _____

PRINTING & COPYING {any copier or printer expenses} _____

TELEPHONE {use of any type of phone services, changeable to either
local or long-distance telephone service providers} _____

SUPPLIES {envelopes, labels, etc. for your work or to repair items} _____

ADVERTISING & PUBLIC RELATIONS _____

CONVENTIONS, CONFERENCES, & MEETINGS (any cost for
representing the A.C.P.C. at an event) _____

TRAVEL { including any other meals, mileage, tickets, parking, tolls, or
lodging not related to a conference or meeting - i.e. taking care of
a performer, meeting w/ a prospective member, or otherwise
related to your committee} _____

OTHER (PLEASE DESCRIBE) _____

TOTAL TO BE REIMBURSED =====

TOTAL TO BE CLAIMED AS & GIVEN AS AN IN-KIND CONTRIBUTION _____

**PLEASE NOTE THAT CLEAR, LEGIBLE RECEIPTS [original or photocopy] OR A
TYPED ITEMIZED LISTING SHOWING AMOUNTS & DATES WHEN EXPENSES
WERE INCURRED ARE REQUIRED OR YOU WILL NOT BE REIMBURSED**

I declare that the expenses incurred are to my belief and knowledge true & correct

SIGNATURE