
LRCCC Expense Reimbursement Request

Note: Reimbursement form must be submitted within 30 days of the date on the receipt. Request submitted without receipts will not be reimbursed.

Purchases in excess of \$100 must be pre-approved by a majority vote of the board of directors.

Date	_____	_____
Amount	_____	Requested by _____
Description of expense	_____ _____ _____	
Signature	_____	
Amount reimbursed	_____	Received by _____

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