Amazing Charity Race Event - Saturday - June 18, 2022 Loveland's Amazing Race, Inc. Expense Reimbursement Form

Complete form and attach all receipts (original or copies). Send to Tanya Stacy, Treasurer.

• Email: <u>TanyaStacyE@Gmail.com</u> (--OR--)

• Mail: Tanya Stacy / Treasurer-ACR, 229 Oneida Dr, Loveland, OH 45140

Reimbursement Deadline: July 18, 2022 (No Exceptions)

Thank you for your help in putting on such a great event!

| 1-Item purchased and purpose: Date of Purchase: Name of Merchant: Amount: | |
|--|--|
| 2-Item purchased and purpose: Date of Purchase: Name of Merchant: Amount: | |
| 3-Item purchased and purpose: Date of Purchase: Name of Merchant: Amount: | |
| 4-Item purchased and purpose: Date of Purchase: Name of Merchant: Amount: | |
| 5-Item purchased and purpose: Date of Purchase: Name of Merchant: Amount: | |
| | |
| Check payable to: | |
| Mail check to: | |
| Tel # & email address: | |
| Total Amount | |