



**WELCOME CLUBS INTERNATIONAL
EXPENSE REIMBURSEMENT FORM**

DATE SUBMITTED:	
NAME:	
E-MAIL:	PHONE:
FULL ADDRESS: (Your check will be mailed to you)	
REASON FOR REIMBURSEMENT:	
INCLUDED IN ANNUAL BUDGET	or
	APPROVED AT EC MEETING Meeting Date:

ITEMIZED EXPENSES	
1) _____	\$ _____
2) _____	\$ _____
3) _____	\$ _____
4) _____	\$ _____
5) _____	\$ _____
TOTAL	\$ _____
SIGNATURE:	

- E-mail or mail the completed form to **WCI Treasurer Helen Salazar (contact info below)**
- **Receipt(s) totaling the amount of reimbursement must be e-mailed or mailed with the completed form**
- **Make copies for your own records**
- **Reimbursement form and receipts must be submitted within 30 days of incurred expense**

Helen Salazar
2800 Clarendon Blvd., Apt W419,
Arlington, VA. 22201

E-mail: wcitreasurer1986@gmail.com
Phone: +1 (202) 422 0518

For Treasurer's Use Only		
Date Paid:	Amount Paid: \$	Check #: