



Oceanside Community Association

**REQUEST FOR REIMBURSEMENT**  
**ATTACH ORIGINAL RECEIPTS**

**SUBMITTAL TO: ACTIVITIES COMMITTEE**

**NAME OF CLUB ACTIVITY** \_\_\_\_\_

**NAME OF CHAIRPERSON** \_\_\_\_\_

DATE	DESCRIPTION AND PURPOSE	AMOUNT	GLA NO.
<b>TOTAL</b>			

**REIMBURSE TO:** \_\_\_\_\_

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
**Club / Activity Chair / Requestor**

**APPROVED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
**Activities Committee Chair**

**REVIEWED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
**Activities Treasurer**

Reimbursement to be made via:    \_\_\_ Petty Cash    \_\_\_ AC Check

**MAIL CHECK** \_\_\_\_\_ **GIVE CHECK TO SOCIAL COORDINATOR** \_\_\_\_\_

Forward completed form (with receipts) to Admin Ass't for further processing.

**SUBMITTED TO ADMIN OFFICE ON** \_\_\_\_\_