

Mico Volunteer Fire Department
Reimbursement Request/Expense documentation

Note: Expenses over \$500 must be approved by the Board of Directors. Please include date of meeting and the amount approved by membership for this transaction.

A receipt from place of purchase must be submitted for every transaction. Please attach receipt to this form.

Date of Request: _____

Requester: _____

Purchase Method: MVFD Debit Card Wal-Mart Money Card
 Valley Mart Gas Card
 Personal expense, please reimburse

Purchase Date: _____

Description of purchased items (please list all items):

Remittance to? _____ Total Amount: _____

Method of Remittance: Leave in box at MVFD Main Station
 Mail to:

