EXPENSE APPROVAL

CLUB: _____ Today's Date: _____

PERSON CLAIMING REINBURSEMENT: _____

CONTACT OF PERSON CLAIMING REINBURSEMENT: E-mail: _____Phone #: _____

EXPENSE OUTLINE

Amount of Expense: $ _____
Reason for Expense: _____
_____
_____
_____
_____.

**Club President is responsible for the accounting of the sport/club account.
Attach original receipts**

President's Approval: _____ _____ _____
(Name) (Signature) (Date)

Cash Given By: _____ Cash Received By:_____

Western University
Sports & Recreation Services
Western Student Recreation Centre
London, ON, Canada, N6A 5B9
Telephone: (519) 661-3552 Fax: (519) 661-3385