



High Flyers Hunting Retriever Club, Inc.

REQUEST FOR REIMBURSEMENT

Please complete this form and attach receipt(s) or other documentation.

RETURN TO: Eileen Sieger, Treasurer

2471 Trotter Drive, Allison Park, PA 15101-2946

Phone: 412-487-3235 E-mail: siegerep@live.com

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ E-mail: _____

• Item(s) or Service(s) Purchased: _____

• Place of Purchase: _____

• Purpose of Purchase: _____

• Date of Purchase**: _____

AMOUNT TO BE REIMBURSED: \$ _____

SIGNATURE: _____

Reimbursement Request Must Be Received Within 30-Days of Purchase.
Reimbursement Will Not Be Authorized After The 30-Day Due Date.

For Treasurer's Use

Date Received: _____ Date Approved: _____ Receipt(s) Attached: YES / NO

Check No.: _____ Check Mailed or Delivered On: _____ Data Entered: _____