

WINDSOR SOCCER CLUB
 P.O. Box 640
 Windsor, CT 06095, USA



Request for Reimbursement

All requests for reimbursement are subject to approval by the club president

Please print, complete and return the completed form with your receipt(s) to:
 WSC Treasurer
 P.O. Box 640
 Windsor, Ct 06095

Email: wsc_treasurer@yahoo.com

**** PLEASE COMPLETE THE INFORMATION BELOW:**

Submission Date: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City/Town: _____
 State: _____
 Zip: _____
 Phone: _____
 Email: _____

Date	Expense Detail	Amount

****All receipts for incurred expenses must accompany request ****

Please remember to save a copy for your records.



FOR CLUB USE ONLY

Amt App.	Date	Check#

Approved by
