

ARTEAST

REQUEST FOR REIMBURSEMENT

Date of request	Approv	ved by:	
Purchased by			
Receipts: (please attach original re	eceipts and a copy)		
(Date of Purchase, Paid to, descri	iption of expense & Class	e.g. Trinity)	Amount
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
		Takal	Ċ
Payment Details for Acco	unting Purposes:	Total	\$
To:			
Date:	Cheque #	Amount \$	
Summary of Payment: (ie, office expenses, postage, & Class ie St. Laurent, AJAE)			<u>\$</u>