



GAMMA PHI BETA

Pasadena Alumnae Chapter Expense Report

Make check payable to: _____

Address: _____

City/State/Zip: _____

Date submitted: _____

Date	Item	Qty	Purpose	Total

Total to be reimbursed: _____

Payee's signature: _____

Payee's office: _____

Notes regarding expense:

For FVP use only:

IMPORTANT:

Budget Debited: _____ Receipts should be taped to a sheet of paper and attached

Date Paid: _____ All receipts must be attached in order to be reimbursed

Paid Check #: _____

Date recorded: _____

Submit within 30 days of purchase to Nadine Ono, 1421 La Loma Road, Pasadena, CA 91105-2133