



Thor Diesel Club

5753 Hwy 85N #557
Crestview, FL 32536

EXPENSE REIMBURSEMENT FORM

DATE : _____
 NAME : _____
 ADDRESS : _____
 CITY, STATE, ZIP _____
 CONTACT PHONE # : _____
 EMAIL : _____

DATE	ITEM	AMOUNT	EVENT / CATEGORY				
			General Expense	East Division	West Division	Rally	Event Name

TOTAL EXPENSE \$ -

Please scan this form along with receipts and email to:
treasurer.tdcv@gmail.com
 Or attach receipts and mail to the address above

Additional Explanation of Expenses:

SIGNATURE: _____ **DATE:** _____

TREASURER APPROVAL: _____ **DATE:** _____

REIMBURSEMENT CHECK #: _____ **DATE:** _____