

# HRA Expense Reimbursement Form

## Instructions:

1. Indicate the event for which the expenditure occurred, (Ex. Frogtown Regatta, Midwest, etc.)
2. Indicate the date of the event, or the period during which the expenses were paid (Ex. 09/24/19; Sept 16-23, 2018; etc.,)
3. For each expenditure, list the date purchased, store name, purchase description, and amount to be reimbursed.
4. Include original (or legible photocopy(ies) receipts with this reimbursement request form. Do not staple.
5. If a receipt includes both HRA and personal expenditures, please clearly indicate the items to be reimbursed by HRA and include only the HRA portion on this form.
6. Indicate below the name and mailing address of the person to whom the reimbursement check should be made payable.
7. Email this form and receipts by:
  - **Sending to:** [Treasurer@huronrowing.com](mailto:Treasurer@huronrowing.com)

## Event Expenditures:

Name\*:

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Address:

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Event:

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Date(s):

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Date	Store Name	Item Description (Food, Supplies, Gasoline, Repairs, etc)	Amount Paid
		<b>Total Amount Requested</b>	

\*the check will be made payable to this person and mailed to the address listed.

Please note: Reimbursement is subject to verification by and approval of the applicable committee/event chairperson. Requests submitted after ninety days following the completion of a season will not be considered.