

FCMTA Request for Reimbursement

Attach all receipts to this expense statement

Please get a board member or committee chair to sign 'approval'

Name: _____ Board member Committee Chair Other

Phone: _____ Email: _____

Purchase Date	Store/ Payee	Item	*Budget Account/ Reason	Amount
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____

Date: _____ Total Expense: \$ _____

Purchaser Signature: _____

Committee Chair Approval Signature: _____

*Budget Accounts

Halloween Recital	Sonatina Festival	Administrative Expenses	Meetings
Facility Use	Facility Use/Piano		Presenter
Misc Exp	Copies, Postage	Advertising	Facility
	Scholarship	Ad in Program for Season	Refreshments
Spring Recital	Judges	One-Time Advertising	
Facility Use	Meals, Snacks	Website Dues	Performance Trophy
Misc Exp			
Ensemble Festival	HS Music Pizza	Community Arts Events	Keyboard Musicianship
Facility Use	Facility Use	Give-aways	
Misc Exp	Misc Exp	Misc Exp	Library
		Printing	

Check No: _____ Paid by: _____ Date Paid: _____