

SLJC Sisterhood Reimbursement Form

For GAMES GALORE

(MUST BE ACCOMPANIED BY RECEIPTS)

Name of person requesting reimbursement _____ Date Submitted _____

Please list the items purchased

- Baskets (actual containers) \$ _____
- Basket Items \$ _____
- Basket Wrapping Supplies \$ _____
- Printing & Postage _____
- Letter to SLJC congregants \$ _____ (postage and envelopes)
- Donor poster \$ _____
- Favors \$ _____
- Raffle Tickets \$ _____
- Other Supplies \$ _____
- Other \$ _____

TOTAL \$ _____

**IN ORDER TO BE REIMBURSED, PLEASE COMPLETE FORM AND REMIT WITH ALL RECEIPTS TO
Co-TREASURER LOIS GARBER, 24111 S. AGATE DRIVE, SUN LAKES AZ 85248. For question
please contact Lois Garber at 440-666-9460**