

**Delaware County Master Gardener Association
Claim for Reimbursement**

NOTE: Prior approval by the committee chair must be obtained before any purchases are made for committee work or by Dr Gao for Extension projects. The deadline for claims is 60 days past the project completion form filed except for standing committees' claims.

Date _____

Claim Submitted by _____

For which MG Assoc approved project? _____

Make check payable to _____

Mailing Address _____

City _____ State _____ Zip _____

Phone Number _____

Receipt Number	Date	Store Name	Description of Items purchased	Amount
				\$
				\$
				\$
			Subtotal from reverse side if more than 3 receipts	\$
			Total Claim for reimbursement	\$

Please make a copy of all receipts and this form for your records. Mail form and original receipts to the treasurer

FOR OFFICE USE ONLY

Date Paid _____ Check Number _____

Check Amount _____ Mail (M) or Handcarry (H) _____