

THE PENN STATE GREATER ATLANTA CHAPTER
PO BOX 550948, ATLANTA, GA 30355

EXPENSES:

DATE: _____

<i>PAID TO</i>	<i>DESCRIPTION</i>	<i>METHOD</i>	<i>RCPT</i>	<i>AMOUNT</i>

TOTAL: \$ _____

THESE ARE VALID AND AUTHORIZED EXPENSES FOR THE PENN STATE GREATER ATLANTA CHAPTER. RECEIPTS ARE ATTACHED FOR ALL EXPENSES. REIMBURSEMENT SHOULD BE SENT TO THE ADDRESS LISTED BELOW.

SIGNATURE: _____

NAME: _____

ADDRESS: _____

PHONE: _____

REIMBURSEMENT:

METHOD OF PAYMENT:

DATE: _____

CASH _____

CHECK _____ # _____

AUTHORIZATION: _____
