



151 Chadburn Squadron

REQUEST FOR REIMBURSEMENT

1. Sign and date your receipt(s). Complete this form, providing a full explanation of the expenditure(s).
2. If you are submitting more than one receipt, please use the summary on page 2 as well, leaving the "Account No." column blank.
3. Submit completed form to Admin. Officer for processing.
4. Reimbursement should be provided within two weeks of submission.
5. Kindly submit receipts within one month of expenditures in order to assist the Squadron's accountants in meeting their military reporting deadlines and budgetary requirements.

Staff Member: _____

Explanation of Expenditure: _____

Total amount of expenditure(s): \$ _____

Print the name to appear on the cheque: _____

Your Signature: _____ Date: _____

CO/DCO Approval: _____ Date: _____

For Accountant Use Only

Account Name/No.: _____

