

## **Boy Scout Troop 9**

St. Mary's Episcopal Church
315 Lake Shore Road
Lake Ronkonkoma, NY 11779
Scoutmaster: Thomas Pekar
Committee Chairperson: John Giordano



Name:		Campout:  Event: Other:		
	Please complete form and re	eturn to Treasurer w	ith receipts attached for all reimbursements.  your Records.	
Date	Place Of Purchase	Amount	Description (Food, Gas, Tolls, Supplies, Patrol cooking, etc.)	Receipt Attached
	Total Reimbursemen	t:	_	
I	ssue check made payable to:		Date Paid	Check #

Receipts for reimbursements must be made within 30 days of purchase.

Deposit reimbursement into the following scout bank: \_\_

Thank You.