

Tuscaloosa County Education Association Reimbursement Form

(Used to reimburse expenses related to refreshments/items)

Form must be completely filled out and receipts attached

Payee: _____

Address: _____

Name of activity: _____

Location: _____

Purpose of purchases: _____

List of vendors/items:

Cost:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Cost: _____

Payee's Signature/Date: _____

(For Treasurer's Use Only)

Approved: _____

Date Paid/Check Number: _____

If refund due to TCEA, date received/payee's check #: _____