Peninsula Girl Scout Day Camp Reimbursement Form

All reimbursement forms should enclose receipts and a detailed description of what reimbursement is for.

Name _____

Address _____

_____

Phone _____

Date	Item	$ Amount
	Total	

I declare that this statement is true to the best of my knowledge.

Signature _____ Date _____

Signature of Admin Team Member _____ Date _____

Please return to : Tina Smith via email or mail

Mail to: 1980 Shoreview Avenue, San Mateo, CA 94401

email: businesspgsdc@yahoo.com

Check Number: _____ Date Paid: _____