

Check Request Barony of Donnershafen

Name _____ Date _____
(full name – this is how check will be made out)

_____ Receipt(s) attached _____ Deposit – receipt to be returned _____ No Receipt

Event (if applicable) _____

Notes: _____

Receipt Date	Receipt is From	Description of purchase	Amount
			\$
			\$
			\$
			\$
			\$
Total Amount of Reimbursement:			\$

Submit Request to Exchequer with receipt(s) attached. Reimbursement for Event expenses must be submitted no later than one month after the Event, or "thank you for the donation"!

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