



# Dayton Section Reimbursement Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Event Date: \_\_\_\_\_

Event coordinator approving reimbursement: \_\_\_\_\_

<b>Event Category</b>	
<input type="checkbox"/> (34) Dinners & Luncheons	<input type="checkbox"/> (52) Postage
<input type="checkbox"/> (35) ASCE Conferences	<input type="checkbox"/> (54) Newsletter & Printing
<input type="checkbox"/> (36) Educational Courses	<input type="checkbox"/> (59) Younger Member Group
<input type="checkbox"/> (40) Miscellaneous	<input type="checkbox"/> (60) Student Activities
<input type="checkbox"/> (49) Contributions, Gifts, Grants	<input type="checkbox"/> (65) ASCE Council
<input type="checkbox"/> (51) Stationary/Office Supplies	

Event Description: \_\_\_\_\_

Item	Amount <b>(Attach Original Receipt)</b>

Total:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Be sure to submit original receipt with reimbursement form.**

Submit form to:      Alisha Burcham, PE  
                                  Treasurer, ASCE Dayton Section  
                                  4200 Dryden Road  
                                  Moraine, OH 45439