



Junior League of Florence, Inc.
1502 W. Palmetto Street
Florence, S.C. 29501

Member Reimbursement Form

Date _____

Committee _____

Project _____

League Member to be reimbursed _____

Or

Merchant to be paid _____

<i>Itemization</i>	<i>Cost</i>	<i>Merchandise</i> (received by Date)
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

Total \$ _____

League Member submitting request _____

Approved by:
Committee Chairperson or Board of Directors _____

ATTACH ALL RECEIPTS

Submit original to Treasurer when order is place.

Keep copy until merchandise is received then forward copy to Treasurer.