



RICHMOND MINOR HOCKEY ASSOCIATION

P.O. BOX 94488, RICHMOND, BRITISH COLUMBIA V6Y 2V6

GENERAL EXPENSE CLAIM SHEET

Name:	Date:
Address:	Phone:
City:	Postal Code:
Purpose/Event:	

Date	Description	Total

The basic principles regarding reimbursement of expenses are that (i) they must be pre-approved; (ii) they should be incurred on behalf of the RMHA; and (iii) they should be kept to a minimum.

I hereby certify that the above information is correct.

(Signature)