



3205 Forest Glade Drive, Windsor, ON, N8R1W7
 SPFHAhockey.com

**Sun Parlour Female Hockey Association
 Expense Reimbursement Request**

If you have incurred expenses related to an SPFHA team or the Association, submit this completed request form and all receipts to the SPFHA Treasurer for approval and reimbursement. Request for expense reimbursement will not be approved without receipts. Email files as PDF/JPG format to treasurer@spfahockey.com

Name _____ SPFHA Position / Team _____

Email _____ Phone number(s) _____

Address _____
 Street Number / City / Province / Postal Code

Date of Expense	Itemized Expense Details	Expense Amount
Total Reimbursement Request		\$

Signature _____ Date _____