



Reimbursement Form

Mohegan Pequot Model Railroad Club

Project Name: _____

Project Description: _____

Club Meeting Approval Date: _____

Authorized Budget: _____

Reimbursement Amount: _____

Your Name (as you want it to appear on reimbursement check): _____

Please Attach Receipts to This Form and Return to the Club Secretary or President.

Authorization

Club President*

Club Secretary*

**This reimbursement request must be authorized by the President and the Secretary of the Mohegan Pequot Model Railroad Club. If the party requesting reimbursement is the President or Secretary, the Vice President shall authorize the reimbursement request along with the other officer not requesting reimbursement. The Treasurer is not allowed to authorize a reimbursement request.*

FOR OFFICIAL USE ONLY: CLUB CHECK NUMBER _____