



Expense Reimbursement

Name:

Address:

Phone:

Email:

Expense Period

From:

To:

Production/School Class:

Department:

Props, Costume, etc.

Notes on Purchases:

Production Category Examples

Costumes, Props, Set, Lighting, Sound, Music, etc.

Itemized Expenses

DATE	ITEM/DESCRIPTION	CATEGORY	COST
SUBTOTAL			
Less Cash Advance			
TOTAL REIMBURSEMENT			

All receipts MUST be attached!

Employee Signature _____ Date _____

Approval Signature _____ Date _____