



**OKLAHOMA
SWIMMING**

Volunteer Reimbursement Request Form

Reimbursement Dates Sept 1, 2009 – August 31, 2010

For reimbursement, submit this form and all invoices and original receipts. No fax copies will be accepted. Use a separate form for each event.

Expenses submitted later than 40 days after the event will not be accepted.

Mail directly to:

OKS TREASURER C/O Debbie Hayes PO BOX 295 JENKS, OK 74037-0295

Name: _____

Mailing Address: _____

City/State/Zip: _____

Telephone #: _____

Reimbursement requested as follows:

| | | |
|------------------|----------|---------------------------|
| Telephone | \$ _____ | Other (detail specifics): |
| Postage | _____ | _____ |
| Duplicating | _____ | _____ |
| Supplies | _____ | _____ |
| Travel Expenses: | | |
| Airfare | _____ | _____ |
| Ground | _____ | _____ |
| Lodging | _____ | _____ |
| Other | _____ | |
| Total Request: | \$ _____ | |

The above expenses were incurred carrying out duties for Oklahoma Swimming, Inc. The activities were completed at the following event (s) under the position of:

Date: _____ Signature: _____

Oklahoma Swimming Reviewed by OKS Treasurer: _____

Date Approved: _____