

Expense Reimbursement & Disbursement Form



**San Francisco FrontRunners**  
 2261 Market St #484A  
 San Francisco, CA 94114

**Instructions**  
 On each receipt highlight the total amount.  
 Attach all receipts to this form and submit the  
 completed form to the SFFR Treasurer -  
 treasurer@sffr.org

Date: \_\_\_\_\_ / \_\_\_\_\_ / 2012  
 Pay To \_\_\_\_\_  
 Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Event	Date of Event	Description of Purchase	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
<b>Total</b>			_____

**Below for Treasurer Use Only**

Approvals

Treasurer: \_\_\_\_\_ President or Secretary: \_\_\_\_\_

Class Type: (check one)                      General     Pride Run                       MM

Check #: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ /2012    Amount: \_\_\_\_\_                      Entered: \_\_\_\_\_