HGA Expense Records

Please send a copy of this form to the HGA office and a copy to your HGA Board Chair. Failure to comply could result in a delay in processing your reimbursement. Please keep track of your HGA expenses. Even if you do not wish to be reimbursed, this record is valuable for your own tax records and valuable when HGA applies for grants as funding agencies are interested in "in kind" donations. Please submit this information with your annual report.

DATE	PROGRAM	POSTAGE	PHONE	COPYING	TRAVEL	SUPPLIES	TOTAL
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00

Grand Total **$0.00**

I Wish To Be Reimbursed: YES NO

Signature: