

**NANSEMOND RIVER POWER SQUADRON
Expense Reimbursement Request**

Name: _____

Education Supplies/Expenses \$ _____

Entertainment _____

Events (COW, Picnic, Auction, Christmas, etc.) _____

Newsletter/Copies Expense _____

OD Expenses _____

Postage/Shipping _____

Supplies/Equipment _____

Other _____

Total Reimbursement \$ _____

Signed: _____ **Date:** _____

Treasurer's Use:
Date Paid _____ **Check #** _____

Submit to
Lt/C Mary Fisher, AP
Treasurer, NRPS
1485 Cherry Grove Rd, N
Suffolk, VA 23432-1819