

GIRL GUIDES OF CANADA: _____ District

Expense Claim Form

Date: _____

Submitted by: _____

Cheque payable to: _____

Unit/Event: _____

	Amounts from Receipt 1	Amounts from Receipt 2	Amounts from Receipt 3	Amounts from Receipt 1	Amounts from Receipt 4	Amounts from Receipt 5	Amounts from Receipt 6	Amounts from Receipt 7	Amounts from Receipt 8	Amounts from Receipt 9	Totals
Program											
Supplies											
Camp											
Uniform											
Fundraising/Gifts											
Food											
Craft											
GST											
PST											
TOTAL REIMBURSED											

Please attach all receipts

Cheque #: _____

Date paid: _____