



The Truckee Tribe
Lacrosse Club

REIMBURSEMENT FORM

Requested by (Payable to): _____

Address: _____

Phone: _____

Email: _____

DATE	ITEM PURCHASED	QUANTITY	PRICE
Total			\$

Signature: _____

Date: _____

****All receipts shall be stapled to this form****

Return and / or Email this form to Pete Halberstadt at pete@truckeetribe.club.

Submitting this request does not imply or guarantee refund approval.

Approved Check#: _____

Not Approved

Approved by: _____

President

_____ Date

_____ Treasurer

_____ Date

The Truckee Tribe Lacrosse Club
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