

FINE ART of FIBER 2019
Expenses

<u>Date</u>	Description	<u>Amount:</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
	Total	_____

Signature: _____

Name: _____

Address: _____

Phone: _____

Please Attach all receipts to this form. Expenses will not be reimbursed without a receipt.

All expenses must be received for reimbursement by: November 25, 2019

Please send or give this form to:

Sandra Geis
1300 Pin Oak Court
Wheaton, IL 60189