

## APPENDIX A — REIMBURSEMENT FORM

### ITEMIZED STATEMENT OF EXPENSE REIMBURSEMENT

NAME \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
DATE \_\_\_\_\_



Receipt Date	Vendor	Cost	Account Line	Project Line	Summary of Items
	<b>TOTAL:</b>				

#### Account Lines:

Master Gardener General	Master Gardener Plum Grove	Master Gardener Butterfly House	Master Gardener Growing Together Grant
-------------------------	----------------------------	---------------------------------	--

#### Project Lines:

Yard & Garden Information	Firefighters' Memorial	Solon Public Library
Butterfly House	Plant Sale & Flea Market	Speakers Bureau
Coralville Historical School House	Hortline	Thymes Newsletter
Ecumenical Towers	Hospice Garden /Willow Creek Park	Plum Grove-Gardens
Demonstration Garden	Classes/Training	Plum Grove-Heritage Party
Downtown City Gardens	Oaknoll Gardens	Plum Grove-Tomato Taste
Fair Grounds Rain Garden	Social Events	Other: Specify
Fair Grounds Flower Beds		

\*Use multiple lines for receipts that reflect different account or project lines. \*Items listed on the receipt are Master Gardener items only. No personal items may be included. Please ask for a separate receipt for JCMG items at time of check out. \*A receipt is required. No handwritten notes will be accepted except from vendors (i.e. farmer's markets) of which a name, phone number, date, & signature is required. \* Reimbursement requests are subject to rejection if proper documentation is not provided.