

**EXPENSE REIMBURSEMENT FORM**

**Ocean City Beach Citizens Council dba Ocean City Jazz Festival**

[info@oceancitync.com](mailto:info@oceancitync.com)

mail receipts to:

Attn: Finance, P.O. Box 1207, Sneads Ferry, NC 28460

Today's Date		Date Rec'd in Acct.	
Name/Payee			

<input type="checkbox"/> Check if new address	Street Address			
	City	State	Zip Code	

Reason for Expense	
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**ITEMIZED EXPENSES**

Check one:  Receipts attached           Receipts already mailed

Date Incurred	Item	\$ Amount	GL Account
<b>Total Check Amount</b>			

Requested by		Date Approved	
Approved by			