



# Mid-Atlantic RLI

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## EVENT EXPENDITURES REIMBURSEMENT

Name: \_\_\_\_\_ (print)

Address: \_\_\_\_\_

\_\_\_\_\_ Zip code: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

RLI EVENT NAME: \_\_\_\_\_ EVENT

DATE: \_\_\_\_\_ EVENT DISTRICT: \_\_\_\_\_ (invoice)

Description of expenditure	Amount	Attached	Comments
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
<b>TOTAL</b>	\$ _____		scanned or faxed invoices acceptable

ADD'L COMMENTS: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail, Fax or Email to Treasurer: Barbara Dresser, 6 Lighthouse Cove Loop, Carolina Shores, NC 28467 or [barbara@dresser.cc](mailto:barbara@dresser.cc), cell phone: 704-813-0644

FOR RLI OFFICE USE ONLY: Paid \_\_\_\_\_ Amount \_\_\_\_\_ Check \_\_\_\_\_ Date \_\_\_\_\_