

**NITTANY MINERALOGICAL SOCIETY, INC.**  
**State College, Pennsylvania**

**EXPENSE REIMBURSEMENT REQUEST**

Please complete the information below, attach supporting receipt(s) and submit the completed form and signed to the Treasurer (Stuart Bingham, 145 Goddard Cir., Pennsylvania Furnace PA 16865). If the receipt(s) include non-reimbursable personal purchases, make sure the NMS expenses are clearly marked and correspond with amount on this form. If the receipt(s) include personal account numbers, redact that information to protect your privacy.

**Name:**

**Date:**

**Address:**

**City, State, ZIP:**

<u>Date of purchase</u>	<u>Vendor</u>	<u>Item Purchased Purpose / category</u>	<u>Amount to be reimbursed</u>
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**TOTAL:**

**Signature:** \_\_\_\_\_

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**Treasurer use only:**

**Date Paid:** \_\_\_\_\_ **Check #:** \_\_\_\_\_ **Use Taxable:** \_\_\_\_\_