

**HAPA EXPENSE REIMBURSEMENT FORM  
2017-2018**

Date	Itemized Expenses	Amount
		Total:

Charge to: \_\_\_\_\_

Committee/Officer: \_\_\_\_\_

Approved by: \_\_\_\_\_ Title: \_\_\_\_\_

I hereby certify that the above itemized amount(s) were expensed by me for the sole purpose of budgeted expenses authorized by the HAPF Executive Board. I have not been otherwise reimbursed.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

Print name and mailing address of to whom the check is to be written:

\_\_\_\_\_

\_\_\_\_\_

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

Please attach all receipts, and give, email, or mail to:

**Connie Zieba**

**4215 Kirby Oaks Drive**

**Taylor Lake Village, TX 77586**

**[ladybug@gokeeki.com](mailto:ladybug@gokeeki.com) or (281) 474-4215**

- Deadline to have all expenses submitted to the HAPA Treasurer for the 2017-2018 year is May 31, 2018.