

Orange Grove Horse & Pony Club Reimbursement Request

Date	Description	Amount	Receipt Attached
Total Cost to be Reimbursed			

Requested By: _____

Event Details: _____

Authorised By: _____

Cheque / EFT #: _____ Date: _____

Please attach all invoices/receipts and forward to the treasurer within 30 days after the purchase.

Email: oghpctreasurer@gmail.com