

MONTANA CATTLEWOMEN Project Funding Request Reimbursement Form

Date of receipt	Description <small>(describe purpose, event, place, grocery store, type of beef used...if applicable. Use 2 lines if needed).</small>	Beef Ed Grade 3	Beef Ed Grades 7-12	Local Block Funding	Crock Of Beef	National Beef Ambass.	MCW Leadership	MCW Collegiate Cattlewmn	MCW Trade-Shows	MCW State Cook-off Promotion
		<i>625cwa</i>	<i>625cwb</i>	<i>625cwc</i>	<i>625cwd</i>	<i>625cwh</i>	<i>625cwi</i>	<i>625cwj</i>	<i>735cwb</i>	<i>735cwc</i>
Totals										

Example:

9/15/2013	Taste of home Show-beef samples									\$256.22
10/21/2013	IGA – 4 chuck roasts				128.32					

**** Please include copies of the entire receipt with the expense "CIRCLED", amounts circled should match reimbursement from.**

Person submitting request: _____ Date submitted: ____/____/_____
Signature

Mailing Address _____

Approved By: _____ Date: _____ Amount Approved: \$ _____ Reimbursement Ck # _____