

REIMBURSEMENT REQUEST

RECEIPTS MUST BE ATTACHED

Committee Name: _____

Chairperson's Name: _____

Reimbursement Amount: _____

Event/Activity Related to: _____

Additional Information:

Payment Method:

Chase QuickPay:

Email address: _____

(Preferred Method - Quickest Option)

Mailed Check:

Street address: _____

Committee Chair Approval:

Co-President Approval:

Required if over \$500

W2 Attached: Required for payment to individual or LLC over \$600

Submit this form, along with receipt(s), to Olivia Peters at bvesa.treasurer@gmail.com. If you are unable to scan materials and attach them directly to your email, please deposit them in the BVESA mailbox and send a follow-up email advising that they are ready for pickup. Checks will be delivered 10-14 days after request is received.

Note: Sales tax will not be reimbursed, as BVESA is a tax-exempt organization. Tax Exempt Certificate is available at BVESA.com.