

## **Cloverdale Minor Baseball Expense Reimbursement Form**

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Address:			
Name:		Date:	
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Date	Description	Amount
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## **RECEIPTS MUST BE ATTACHED**

**Submit to TREASURER via Email:** 

Treasurer@cloverdalebaseball.com

**OR MAIL TO:** 

Cloverdale Minor Baseball Association Box 34163 – 17790 #10 Highway Surrey BC V3S 8C4