

**NLA CONFERENCE  
REQUEST FOR REIMBURSEMENT**

Send two (2) copies of completed form along with original receipts and a copy of receipts to:

**Michelle Mazzanti  
Henderson District Public Libraries  
280 S. Green Valley Pkwy.  
Henderson, NV 89012**

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

Office/Function Name: \_\_\_\_\_

Name of Person Submitting Request: \_\_\_\_\_

Itemization of Expenditure

Amount of Each Expenditure

TOTAL REIMBURSEMENT REQUESTED: \_\_\_\_\_

Attach receipts for ALL expenditures.

Make Check Payable to: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

*For NLA Office Use:*

*FINANCE CHAIR APPROVAL:* \_\_\_\_\_ *DATE:* \_\_\_\_\_

*TREASURER PAID:* \_\_\_\_\_ *DATE:* \_\_\_\_\_ *CHECK #:* \_\_\_\_\_