

# Maui Boat & Yacht Club

## Expense Reimbursement Request

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### Person Requesting Reimbursement

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Description of Charge	Date	Amount	Receipt Y/N	Authorized By

Date Submitted: \_\_\_\_\_ Date Pd: \_\_\_\_\_