

Picnix14 Reimbursement Form
Care of Linux Users' Group of Davis

Please return with receipt(s) to the treasurer:

Linux Users' Group of Davis
Attn: Picnix14 Reimbursement
1105 Kennedy Place #1
Davis, CA 95616

- NB: 1) Neither receipts without form, nor form without receipts shall be accepted.
2) There is a 60-day age limit on reimbursed receipts.

Your Name: _____

Mailing address: _____

Date: _____

Receipt #	Amount	Description of items bought
1	\$	
2	\$	
3	\$	
4	\$	
5	\$	
6	\$	
7	\$	
8	\$	
9	\$	
10	\$	

Total: \$_____ Number of receipts: _____

Additional information, if needed: