

GLENS FALLS - SARATOGA CHAPTER
ADIRONDACK MOUNTAIN CLUB
PO Box 2314 Glens Falls NY 12801

2014 EXPENSE REIMBURSEMENT FORM

Submit form to: Steve Mackey
21 MacArthur Drive, Glens Falls, NY 12801

NAME: _____

NO.	CATEGORY	AMOUNT	DESCRIPTION
1	Administration	_____	_____
2	Conservation	_____	_____
3	Education	_____	_____
4	Hospitality	_____	_____
5	Membership	_____	_____
6	Newsletter	_____	_____
7	Outings	_____	_____
8	Program	_____	_____
9	Publicity	_____	_____
10	Trails	_____	_____
11	Website	_____	_____
12	Wilderness	_____	_____
13	Younger Members	_____	_____
14	Annual Banquet: Dinners	_____	_____
15	Annual Banquet: Entertain. & Other	_____	_____
16	Board of Directors	_____	_____
17	Club Donations	_____	_____
18	Fire Tower Challenge	_____	_____
19	Special Donations	_____	_____
20	Youth Projects - DEC & Trail Camps	_____	_____
21	Miscellaneous	_____	_____
	TOTAL	_____	_____

SIGNATURE: _____ DATE: _____

Receipts Required. The Chapter is exempt from New York State sales tax. Our number is EX 161442. A copy of the Sales Tax Certificate is available from Steve Mackey.

FOR TREASURER'S USE ONLY

Date: _____ Check Number: _____ Check Amount: _____