

**Mountain Magic Leader Weekend**  
**Instructor/Planning Committee Reimbursement Form**  
(Please attach receipts)

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, ZIP Code \_\_\_\_\_

Phone \_\_\_\_\_

Committee or Class Name \_\_\_\_\_

# Registered: \_\_\_\_\_ Class Fees Per Person: \$ \_\_\_\_\_ Total Budget: \$ \_\_\_\_\_

Reimburse me by:

☐ cash/check at MMLW (receipts must be submitted by Sat. 8 PM)

☐ check – please mail to my address above

☐ PayPal \_\_\_\_\_ (your PayPal address)

ITEM DESCRIPTION	Amount to be Reimbursed

TOTAL AMOUNT TO BE REIMBURSED \$ \_\_\_\_\_

Please complete ONE (1) form per class/committee and submit to Jeanenne Adams no later than February 15<sup>th</sup> for reimbursement. You may bring it with you to camp and turn in at check-in, and we'll have your money for you that weekend. Otherwise, please mail (email) this form and your receipts to MMLW, c/o Jeanenne Adams, 355 Battle Woods Trail, Marietta, GA 30064 or [pradams@mindspring.com](mailto:pradams@mindspring.com)

7/28/2018

OFFICE USE ONLY

Reimbursement Type (Cash or Ck #) \_\_\_\_\_

Date \_\_\_\_\_

Amount \$ \_\_\_\_\_