

**Alpine Lodge Expense Reimbursement**  
(Not for Improvements or Major Projects)

Name: \_\_\_\_\_  
(please print)

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

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

**Instructions:** Please ensure that all receipts/invoices are attached. Each expense item on the receipt should be clearly labeled by the account code to which it belongs. If the item falls into an other category, briefly describe type of expense.

**Reminder:** Labor cannot be expensed unless it is a Contract Service with Licensed Company.

Account Group	Amount	Acct. Code
<b>1) Supplies</b>		
Pantry Food & Kitchen & decorations, name tags, Etc.		65042
Housekeeping		65041
First Aid		65043
Other: describe		
<b>2) Office Expense</b>		
Office Supplies & Postage		65077
Printing/Copying		65078
<b>3) Work Parties</b>		65035
<b>4) Host Training</b>		65045
<b>5) Cleaning &amp; Laundry</b>		65025
<b>6) Repairs &amp; Maintenance</b>		65015
<b>7) Contract Services</b> (need invoice)		62150
<b>8) Other: describe</b>		
<b>Total</b>	0	

I certify that the above expenses were incurred for the purposes of Alpine Lodge.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

When completed mail report and receipts/invoices to:

**Amy Pertschuk**  
**31 Liberty DoCl**  
**Sausalito, CA 94965**

OR send a SIGNED PDF to my eMail address: amy@kpwest.com

10/6/24 AP