

NHI COMMITTEE CHAIR EXPENSE FORM

Please use for all Committee Chair expenses

Name of Committee

Date Submitted

Name

Address

Phone

email

PLEASE ATTACH RECEIPTS

BUDGET CATEGORIES	<u>Amount</u>	<i>Please specify detail: copies, literature order, mailing, supplies, etc.</i>
Administrative <i>[includes PO Box Mail Coordinator; Rep binders]</i>		
Chairman		
Mailing Coordinator		
Meeting List		
Officer Mileage Reimbursement		
Promises		
Public Information		
Secretary		
Treasurer		
Twelve Step Within		
Ways & Means		
Other, please specify:		
Expense total amount		

NHI TREASURER USE ONLY

Date Intergroup Paid:

Check #
