Indian River Genealogical Society

Est. 1983

REQUISITION/ REIMBURSEMENT FORM

Date Submitted: _____

Submitted By: _____

PO NUMBER: _____

Approved By: _____ Date Approved: _____

Email Completed request to: 1. President, 2. Vice President, 3. Secretary and 4. Treasurer
Internal Control: The same individual may not submit, approve, and pay a reimbursement request.
All requests must include itemized receipts showing vendor, date, description, and amount.

DATE	DESCRIPTION	AMOUNT
		$
		$
		$
		$

TOTAL AMOUNT REQUESTED: $ _____

Submitted By (Signature): _____ Date: _____

Approved By (Signature): _____ Date: _____

Paid By (Signature): _____ Date: _____

Check/Transaction #: _____ Date Paid: _____

CHARGED TO: (IRGS Internal Account)

_____

INDIAN RIVER GENEALOGICAL SOCIETY

Expense Requisition/Reimbursement Form & Instructions

1. Purpose

To ensure all expenses are properly documented, authorized, and reimbursed in accordance with sound nonprofit financial practices.

2. Eligible Expenses

Reimbursements are limited to reasonable, necessary, and approved organizational expenses supported by documentation.

3. Documentation Requirements

All requests must include itemized receipts showing vendor, date, description, and amount. The request will be returned unpaid until correct documents are received.

4. Submission Procedures

Requests must be submitted within 30 days. Incomplete requests will be returned.

5. Conflict of Interest

If there is a conflict of interest the board member must recuse themselves from approving any payments.

6. Approval Authority

Expenses must be approved in this order by the President, Vice President, Secretary or Treasurer. Treasurer may only approve if the Treasurer is not purchasing, or signing the payment. No individual may approve their own expense.

7. Segregation of Duties

The same person may not submit, approve, and pay a reimbursement. At least two individuals must be involved.

8. Payment Procedures

Payments will be issued after approval within 7–14 days.