



UMTA Reimbursement Statement

Requested by:		Phone #:			
Chapter:	Date:	Approved by:			
Make Check Payable to:					
Mail Check to:					
Special Instructions:					
Date	Item	Purpose	Receipt Yes / No		Amount
Total Amount:					

Instructions

1. Complete all sections of the form.
2. Attach all receipts and invoices.
3. Mail complete form to UMTA Treasurer: Gloria Savage, 6545 S. Clematis Way, West Jordan, Utah 84081
4. Address any questions to Gloria Savage: Phone: (801) 913-0810 Email: gps.music.makers@gmail.com

Paid by Check #: _____

Budget Category: _____

Date: _____