

Youth Program Volunteer Expense Claim Template

Please fill out this form to claim reimbursement for approved expenses incurred during volunteer activities. Attach all original receipts to this sheet.

Volunteer Information

Volunteer Name: Date of Submission:

Youth Program / Project Name: Volunteer Role:

Email Address: Phone Number:

Mailing Address (for payment):

Expense Details

Date of Expense	Description of Expense (e.g., craft supplies, snacks, mileage)	Category	Receipt Attached? (Yes/No)	Amount (\$)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Claim Amount:				<input type="text"/>

Authorization and Signatures

By signing below, the volunteer certifies that the expenses listed above were incurred directly for the benefit of the Youth Program and are accompanied by valid receipts.

Volunteer Signature: Date:

Program Coordinator Approval: Date: