



INTERNATIONAL ASSOCIATION OF ARSON INVESTIGATORS

ILLINOIS CHAPTER

REIMBURSEMENT FORM

Form must be filled out completely, with receipts attached, and submitted with-in thirty (30) days of purchase. Scanned receipt copies are acceptable and the Form should be e-mailed to the Chapter Treasurer for reimbursement.

If you **DO NOT** have Adobe DC, in order to digitally sign the Form, please download Adobe Reader, click on the "Requestor's Signature" box on the Form, then click on "Configure Digital ID", "Create a New Digital ID", ([continue](#)), "Save to Windows Certificate Store", ([continue](#)), Enter your Name and E-mail Address, and hit "Save".

Once saved, the "Sign with Digital ID" box will pop up, click continue, and then "Sign", once the "Sign as (Your Name)" box pops up, Save the Form as "[Your Name - Reimbursement Form - Current Date](#)", and you are done.

Once signed, please e-mail your saved copy and relevant receipts to the Chapter Treasurer for reimbursement processing. All associated receipts and the Form must be submitted before processing begins.

Date: _____ Budget Category: _____ Approved By: _____

Submitted By: _____ Phone No. _____ E-mail: _____

Send To: (Name/Address/C/S/Zip) _____

Expense Description	Amount
Total:	

Requester's Signature

President's Signature

Treasurer's Use Only

Check No.: _____ Amount: _____ Date: _____

Budget Category: _____

Treasurer's Signature