



The ALBERTA TEACHERS' ASSOCIATION - PEMBINA HILLS LOCAL 22

## General Purchase Claim Form For Products or Services

Name: \_\_\_\_\_

Description of Purchase or Service: \_\_\_\_\_

\_\_\_\_\_

Amount: \$ \_\_\_\_\_ (Please attach receipt(s))

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(PIPA: Any information you provide on this claim form may appear on the printed Treasurer's Report to Local Council.)



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