



Downtown Neighborhood Association

Post Office Box 9416
Savannah, Georgia 31412
912-236-8368

REIMBURSEMENT INVOICE

I incurred the expenses detailed on the attached receipts on behalf of the Savannah
Downtown Neighborhood Association in support of (activity)_____

on (date)_____.

Request a reimbursement check for my total expenses of (amount) \$_____

by mail to me at the following address (printed name and address):

_____.

(signature)

Instructions:

Please send this Reimbursement Invoice, with original receipts for all the expenses claimed attached, to the DNA Treasurer, Bill Coonce, at 27 East Jones Street, Savannah GA 31401

Also, please send an email to Treasurer@SavannahDNA.org and abcoonce@bellsouth.net , confirming that the Reimbursement Invoice has been sent and include the total amount of your expenses and your mailing address. Your email will allow the Treasurer to get your reimbursement check on its way to you immediately, via DNA's online banking facility, even if he isn't at home when your invoice arrives.

Please keep a copy of the reimbursement invoice and query the Treasurer by email if you don't receive your reimbursement within two weeks. You can contact the Treasurer 912 234-2114.