



**KMC Hiking Camp Reimbursement Form**

Send to:

*Leon Arishenkoff  
4318 Poplar Ridge Rd.  
Crescent Valley, BC, V0G 1H1*

**Forms and receipts must be received no later than September 10.**

CAMP # \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Item	Receipts Subtotal
Staples	_____
Meat, Dairy & Perishable Products	_____
Wine	_____
Bread	_____
Dry Goods	_____
Produce	_____
Roast Beef	_____
Chicken Curry	_____
Spaghetti Sauce, meat or veggie	_____
Chili, meat or veggie	_____
Beef Stew	_____
Salmon Loaf	_____
Turkey Sausage	_____
Borscht	_____
Lentil Soup	_____
Minestrone Soup	_____
Pies	_____
Cornbread	_____
Carrot Cake	_____
Upside-down Cake	_____
Chocolate Cake	_____
Garbage	_____
Miscellaneous	_____
Miscellaneous	_____