



## Reimbursement Request Form

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

Date submitted: \_\_\_\_\_

<b>Date of expense:</b>	_____		
<b>Description of expense:</b>	_____		
<b>Amount:</b>	_____		
<b>Receipt attached:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, explanation is required):		
<b>Budget category:</b>	<u>Fundraisers</u> <input type="checkbox"/> Extravaganza <input type="checkbox"/> Funnel cakes <input type="checkbox"/> Fall craft fair <input type="checkbox"/> Spring craft fair <input type="checkbox"/> Battle of the bands <input type="checkbox"/> Bingo <input type="checkbox"/> Pizza sales <input type="checkbox"/> Pops concert <input type="checkbox"/> Spirit sales <input type="checkbox"/> Other _____	<u>Marching Band</u> <input type="checkbox"/> Guard equipment <input type="checkbox"/> Instructor fees <input type="checkbox"/> Directors expense <input type="checkbox"/> Drum major <input type="checkbox"/> Props <input type="checkbox"/> Transportation <input type="checkbox"/> Uniform cleaning/repairs <input type="checkbox"/> Accessories <input type="checkbox"/> Other _____	
	<u>Instrumental Music</u> <input type="checkbox"/> Instrument purchase <input type="checkbox"/> Instrument repair <input type="checkbox"/> Equipment <input type="checkbox"/> Instructor fees <input type="checkbox"/> Directors expense <input type="checkbox"/> Music purchase <input type="checkbox"/> Other _____	<u>Other</u> <input type="checkbox"/> Donations / hospitality <input type="checkbox"/> Awards / patches <input type="checkbox"/> Banquet <input type="checkbox"/> Transportation <input type="checkbox"/> Scholarship <input type="checkbox"/> Office expense <input type="checkbox"/> Postage <input type="checkbox"/> Web site <input type="checkbox"/> Accountant <input type="checkbox"/> Other _____	

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**TREASURER USE ONLY:**

Date paid: \_\_\_\_\_

Amount: \_\_\_\_\_

Check number: \_\_\_\_\_