

# EXPENSE REIMBURSEMENT/PAYMENT REQUEST

\_\_\_\_\_ **Account**

\_\_\_\_\_ **Date**

## SECTION I - (Complete For Reimbursement Request Only)

I, \_\_\_\_\_, request reimbursement for the disbursement of funds as shown on the attached documents (i.e., receipts, invoices, refunds, etc.), which total \$\_\_\_\_\_. Funds were disbursed for the purpose(s) of:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## SECTION II - (Complete For Payment Request Only)

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

Pay To: \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

[Attach documentation to support disbursement (i.e., invoice, club minutes, etc.)]

Minutes attached  Receipt(s) attached (taped to 8 1/2"x11" sheet) PO Number: \_\_\_\_\_

## SECTION III - Authorizations (Complete For All Requests)

\_\_\_\_\_ Signature of Sponsor/Teacher

\_\_\_\_\_ Signature of Principal

**ATTACH CHECK STUB TO TOP OF THIS FORM**