

## Reimbursement or Request For Money

**Today's Date:** \_\_\_\_\_ **Amount:** \_\_\_\_\_

**Your Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Sub-Committee Name:** \_\_\_\_\_

**Event & Date:** \_\_\_\_\_

**I need money to:** \_\_\_\_\_

\_\_\_\_\_

**Approved by Committee:** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No** **Date:** \_\_\_\_\_

\_\_\_\_\_

**To be completed by Treasurer before writing a check:**

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

**Check Payable to:** \_\_\_\_\_

**Check Number:** \_\_\_\_\_ **Check Amount:** \_\_\_\_\_

**Other:**

\_\_\_\_\_

**To be completed by Treasurer after purchase is made:**

**Receipts Turned in Total:** \_\_\_\_\_

**Cash Returned Totals:** \_\_\_\_\_

**Initials:** \_\_\_\_\_