

MHS Cheer Booster Club Reimbursement Expense Form

This form **must** accompany any request for reimbursement from the MHS Cheer Booster Club. Please list the receipts separately with full description of items purchased and total the reimbursement amount you are requesting at the bottom of the column. Scan or attach all original receipts with this form and email or submit to the Booster Club Treasurer.

In order to receive reimbursement, expenditures **must** be approved by the board prior to purchase and reimbursement claims must be submitted within 30 days of expenditure.

Date: _____

Requested by: _____

Make Check Payable to: _____

Address: _____ City/State: _____ Zip: _____

Activity/Event/Budget Category: _____

Itemized Expenses:

Date	Vendor/Supplier	Description of Items Purchased	Amount
Total Due			

Requester Signature: _____

Email MHS Cheer Booster Club Treasurer: at Treasurer@mcneilcheer.com

Reimbursement Date: _____ Check #: _____