Westview High School
Grad Committee 2018
Expense Reimbursement Form

Expense Authorization Prior to Purchase:

Obtain authorization for expense PRIOR to spending money from Committee Chair and Treasurer

Requested by: _____

(Name, committee, phone) _____

_____

Description of Expense: _____ Estimated Cost: _____

Approved by: _____

Reimbursement Request:

Must be received by treasurer within 30 days of purchase

Original receipts must accompany all requests. Please staple or tape receipts to back of form.

Description/Store	**Budget Category**	**Amount**

TOTAL $_____

Check Recipient Name: _____

Phone Number: _____

Address: _____

Rec'd by Treasurer: _____ Date Paid: _____ Check #: _____