# PTHS Cheer Booster Group
# Reimbursement Request Form

**Committee: _____**

*Ex. Senior Recognition, Snowball Dance, P-Rade*

**Requester: _____**

**Date receipts were submitted: _____**

**Total Reimbursement Amount: _____**

**Make check Payable to: _____**

**List of items to be reimbursed:**

| ***Item*** | ***Purpose*** | ***Amount*** |
|---|---|---|
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**Signature of requester: _____**

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*Treasure's Use*

Check #: _____ Date check written: _____/_____/_____

Budget line expense is to be applied: _____

Mailed: Yes No Date Mailed: _____/_____/_____

Hand Delivered: Yes No Date Delivered: _____/_____/_____