

**FHS Touchdown Club  
Expense Form**

- Check Request**
- Receipt for Debit Card**

Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Budget Category: \_\_\_\_\_

Date	Item Description/purpose	Place of Purchase	Amount

Total Request:     \$ \_\_\_\_\_

**To Be Completed by Treasurer**

Date Paid/receipt received: \_\_\_\_\_

Check Number if applicable: \_\_\_\_\_

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