



# Reimbursement Voucher

Kentridge High School Booster Club

**All Team Reps** when issuing reimbursement checks need to fill out this form (along with the appropriate receipts) attached and give it to the **KRHSBC Treasurer** no later than the date of the "Annual" Booster Club meeting in June. This form (along with the receipts) will become part of the Club Permanent Files. These permanent files are required to maintain the Club's "Non-Profit/Tax Exempt" status. It is the Team Rep's responsibility to fill out this form, not the Treasurer's. Thank you.

Team Rep: \_\_\_\_\_

Representing: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Source of Reimbursement: \_\_\_\_\_

	<u>Explanation of Expenses</u>	<u>Amount</u>
1)	_____	\$ _____
2)	_____	\$ _____
3)	_____	\$ _____
4)	_____	\$ _____
5)	_____	\$ _____
6)	_____	\$ _____
7)	_____	\$ _____
8)	_____	\$ _____

**Total Reimbursement Amount:** \$ \_\_\_\_\_

Check Payable To: \_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

**Signature of Team Rep:** \_\_\_\_\_

Check #: \_\_\_\_\_

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

### For Booster Club Treasurer's Use Only

Bank Statement Reconciliation:

Check #: \_\_\_\_\_

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

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

**Treasurer's Signature/Date:** \_\_\_\_\_