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# Reimbursement Voucher

## CHS School Booster Club

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**All Team Reps** when issuing reimbursement checks need to fill out this form (along with the appropriate receipts) attached and give it to the **CHS Booster Treasurer** for immediate review. 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.

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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: \_\_\_\_\_

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### For Booster Club Treasurer's Use Only

#### Bank Statement Reconciliation:

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

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

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

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

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