

Auburn Riverside High School Booster Club
Reimbursement or Check Request Form

Contact Katie Nelson, Treasurer at 253.347.5960 or nelson.katie@rocketmail.com

Check Payable to : _____ Amount: _____

Mail to address for **bill payment** OR direction for check distribution for **reimbursements**:

- You must include a copy of the invoice in order to request a *bill payment*.**
- You must include a copy of the receipt for any *reimbursement of funds*.**
- Team/Club: _____
- Submitted by: _____ contact info _____
- Coach/Advisor approval: _____ contact info _____
- Athletic Director Approval (coaches stipend only) _____

To be completed by treasurer only

Notes:
Date of check
Check #
Check payable to:
Check amount: