

Family Name: \_\_\_\_\_ Homeroom: \_\_\_\_\_

St. Vincent de Paul School

Expense Reimbursement for Year 2010-2011

Payable to: \_\_\_\_\_

As of \_\_\_/\_\_\_/\_\_\_

Total Amount Requested \$\_\_\_\_\_.\_\_\_\_\*

**Approval Signature & Original Receipts Required**

**Fundraiser & Related Expense Reimbursements:**

<b><u>Auction:</u></b>	<b><u>Date(s):</u></b>	<b><u>Amount:</u></b>
Admin/Computer Supplies	_____	_____
Auctioneer Services	_____	_____
Credit card discount	_____	_____
Custodial Services	_____	_____
Decorations	_____	_____
Event Coord. Services	_____	_____
Food Purch. Volunteers	_____	_____
Food Service (Thurs)	_____	_____
Food Service (Sat.)	_____	_____
Postage	_____	_____
Prizes	_____	_____
Printing & stationery	_____	_____
Publicity	_____	_____
Reimb of Fund-an-Item	_____	_____
Rentals	_____	_____
Cash Advances	_____	_____
<b><u>* Auction Treasurer's Approval:</u></b>		

<b><u>Grocery Certificates:</u></b>	<b><u>Date(s):</u></b>	<b><u>Amount:</u></b>
Miscellaneous	_____	_____
Printing & postage	_____	_____
Supplies	_____	_____
<b><u>* Chair's Approval:</u></b>		

<b><u>Raffle:</u></b>	<b><u>Date(s):</u></b>	<b><u>Amount:</u></b>
Award prizes	_____	_____
Licenses & fees	_____	_____
Miscellaneous	_____	_____
Printing	_____	_____
Rental	_____	_____
<b><u>* Chair's Approval:</u></b>		

<b><u>Tupperware:</u></b>	<b><u>Date(s):</u></b>	<b><u>Amount:</u></b>
Miscellaneous	_____	_____
Printing & postage	_____	_____
<b><u>* Chair's Approval:</u></b>		

<b><u>Bazaar:</u></b>	<b><u>Date(s):</u></b>	<b><u>Amount:</u></b>
Food Purchases	_____	_____
Miscellaneous	_____	_____
Photos	_____	_____
Printing & postage	_____	_____
Publicity (signs)	_____	_____
Rental (costume)	_____	_____
Rental (tables)	_____	_____
Services (janitorial)	_____	_____
<b><u>* Chair's Approval:</u></b>		

<b><u>Other:</u></b>	<b><u>Date(s):</u></b>	<b><u>Amount:</u></b>
Coffee & donuts	_____	_____
Miscellaneous	_____	_____
NCEA conference	_____	_____
Postage	_____	_____
Printing & stationery	_____	_____
Supplies	_____	_____
<b><u>* Treasurer's Approval:</u></b>		

Request: Check [  ] Fundraising Credit [  ] Request not in Budget [  ]  
 Approved by: \_\_\_\_\_ (Over \$500 Required by Executive Board Members)

Date Received: \_\_\_/\_\_\_/\_\_\_ Date Paid: \_\_\_/\_\_\_/\_\_\_ Check#: \_\_\_\_\_ Amount: \$\_\_\_\_\_.\_\_\_\_