Student Fund Transfer/Reimbursement Check Request Form Pleasant Grove High Band Boosters

D	ate:	
St	tudent Name:	
Requested Amount:		
	reimbursement check requested, make check payable to:	
A	ddress and phone number:	
	_	
Fı	und Transfer For:	
	Band Shoes	
	Uniform Cleaning Fee	
	Disneyland	
	Winter Percussion or Color Guard Expenses:	
	Other:	
	To Sibling Account: (Name)	
ъ		
	eimbursement For: (Receipt(s) required)	
	Music Lessons / Band Camp	
	Instrument Repair	
	Musical Supplies (e.g. reeds, instrument stand)	
	Other:	
Pa	arent/Guardian Signature: Date:	
	======================================	
	unds to be drawn from Student Account	
	vailable Balance:	
	uthorized by: Date:	
	mount of Check: Check Number:	
	======================================	
•		

Please send this completed form with copy of receipt(s) to Julie Rogers, Band Booster Treasurer, or turn it in to Mr. Souliere. Any questions, please E-mail <u>PGHSBandBoosters@GMail.com</u>.