WEST RIDGE WILDCAT CLUB Expense Reimbursement Request

| NAME | | | |
|------------------------------|---|-------------------|----------------------|
| COMMITTEE/EVE | NT | | _ |
| ADDRESS | | | |
| PHONE NUMBER_ | | | _ |
| EMAIL | | | |
| The following iten School | ns have been purchased for the b | enefit and/or use | of West Ridge Middle |
| <u>ltem</u> | | Cos | <u>st</u> |
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| | | Total: | |
| PLEASE NOTE: | 1. ALL RECEIPTS MUST BE AT | TACHED. | |
| | 2. THE WILDCAT CLUB DOES NOT REIMBURSE ANY SALES TAXES. | | |
| | 3. Requests submitted by Committee Chairs, for expenses approved in the budget, will only require the Treasurer's approval. | | |
| COMMITTEE/EVEI | NT CHAIR APPROVAL | | |
| Chair Name: | | Signature: | |
| Date Paid: | | Check #: | |
| Treasurer's Appro | val: | | |