



ETHS IMPB

Request For Reimbursement/Payment Authorization Form

INSTRUCTIONS: Please complete all un-shaded parts of the form. Attach original invoices/receipts/bill statements. Place the completed form and its supporting documents in the Music Box located in the music room. May not be processed, if incomplete and/or missing necessary documentation. Question/needs assistance contact the treasurer at treasurer@ElToroMusic.org

Expenditure Information – To be Completed by Person Requesting Payment

- **Detail of Expenditure(s):**

1. Description of item(s) purchased: _____

2. Program/Event for which expenditure were made: _____

3. Total amount (attach all receipts/invoices): _____

- **Payee:**

Payee name: _____

Email: _____ Phone #: _____

- **Method of Payment:**

- Check left at school in Music Room
- Check mailed
- Pay attached bill directly to vendor

Special Instructions/Mailing Address: _____

- **Signature of person requesting payment:**

Date: _____

Approvals – Both signatures required

President: _____

Date: _____

Treasurer: _____

Date: _____

Budget Line Item: _____

Treasurer Use Only:

Check # _____ Check Date: _____ Check Amount# _____