



CHECK REQUEST FORM - GALA EXPENSE REPORT 2011

Havana Nights - An Evening at the Tropicana

CHECK AMOUNT:

DATE NEEDED:

PAYEE

Name:

Address:

City:

State:

Zip:

Company Contact:

REQUESTED BY

Name:

Address:

City:

State:

Zip:

Phone:

Email:

Mail to payee

Pick up in office

Send home with child

Homeroom teacher _____

EXPENSE CATEGORY

Auction

Decorations

Publicity

Auctioneer

Entertainment

Raffle

AuctionStar

Hotel/Facilities

Security

Chairman

Postage

Other - Describe in Detail

Class Projects

Program/Invites/Stationery

BRIEF DESCRIPTION OF PRODUCT OR SERVICE

AUTHORIZATION

Signature of Gala Chairperson or Treasurer

Date

GALA TREASURER - Record into Gala books.

Date Entered

Gala Books Reference Number

To be completed by school office

Check Number

Date Check Issued

Date

Entered by:

**ORIGINAL RECEIPTS OR INVOICES MUST BE ATTACHED TO THIS FORM IN ORDER FOR CHECK TO BE ISSUED.
WHEN PURCHASING ITEMS FOR REIMBURSEMENT, BE CERTAIN TO USE THE SCHOOL'S TAX EXEMPT FORM.
REIMBURSEMENT WILL NOT BE PROVIDED FOR SALES TAX.**