

Grosse Pointe North High School  
Band and Orchestra Boosters  
Expense Reimbursement Form

Committee/Activity: \_\_\_\_\_

Name (of person requesting check): \_\_\_\_\_

Committee/Position: \_\_\_\_\_ Phone: \_\_\_\_\_

Date Required: \_\_\_\_\_ Amount Requested: \_\_\_\_\_

Check Payable To: \_\_\_\_\_

Address to Send Check to: \_\_\_\_\_

\_\_\_\_\_

Purpose: \_\_\_\_\_

\_\_\_\_\_

Please attach all receipts for reimbursement. Submit the form with receipts to the GPN Band and Orchestra Booster Treasurer.

\_\_\_\_\_

Treasurer Use Only:

Check Number: \_\_\_\_\_

Date Issued: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

By (initials): \_\_\_\_\_