

Attach receipts, invoices, or contract to this form. Please submit within 30 days of incurring expense.



CENTAURUS HS BAND BOOSTER
EXPENSE REIMBURSEMENT FORM



DATE: _____ SUBMITTED BY: _____

BUDGET CATEGORY: _____
(Marching Band, Winter Guard, Winter Indoor Percussion, etc)

DATE	DESCRIPTION	COST
	TOTAL	

Write check to: _____

Mail check to: _____ **OR**

To receive reimbursement electronically via Zelle, provide email address:

----- Band Booster Use Only -----

Received by: _____

Circle One: Approved Denied

Check No. _____ OR Zelle Transaction Date: _____

** Give this form with attached documentation to: Treasurer – Suzanne Finnigan
scan/email treasurer@centaurusband.org or mail: P.O. Box 264, Lafayette, CO 80026