

REQUEST FOR REIMBURSEMENT FORM

LM PANTHER BAND

(All reimbursements must be request within 30 days of the expense)

Date of Request: _____

Date of Expense: _____

Amount of Reimbursement: \$ _____

Person to be reimbursed: _____

Purchase was made for: *(circle one)*

Marching Band Expense	OMEA Expense	Concessions
Symphonic Band	JR. High Band	Instrument (repair or replace)
Concert Band	Equipment	LMHS Choir
Fundraiser Expense	Other: _____	

Purpose of Purchase: _____

Approved By: _____

Date: _____

Payment will be issued within 10 days from date of receipt.