



# Sequoit Pride

A Member of Antioch Sequoits Booster Club, Inc.  
PO Box 4282 Antioch, IL 60002

## Sequoit Pride Reimbursement Request

Reason For Reimbursement: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Event/Project/Category: \_\_\_\_\_ Date: \_\_\_\_\_

Your Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Amount: \_\_\_\_\_

Was This Request Previously Approved At A Sequoit Pride Meeting? Yes  No

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

Mail Check To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Note: Please all receipts totaling the amount of the reimbursement requested my be attached to this request. No checks will be written without valid original receipts.*

Approved By: \_\_\_\_\_  
\_\_\_\_\_  
David Raymond, Treasurer Date

.....  
*Internal Use Only*

Account: \_\_\_\_\_

Check #: \_\_\_\_\_ Check Date: \_\_\_\_\_ Check Amount: \_\_\_\_\_



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[sequoit.boosters@chsd117.org](mailto:sequoit.boosters@chsd117.org)

[www.sequoitpride.com](http://www.sequoitpride.com)



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Project Name: \_\_\_\_\_

Approved Budget: \_\_\_\_\_

Deadline To Submit Expenses: \_\_\_\_\_

If a project requires more funds than were initially approved, please contact the board via email ([sequoit.boosters@chsd117.org](mailto:sequoit.boosters@chsd117.org)) *prior* to spending any amount over the approved budget. When a budget increase request is received, the board will take a vote of the board members via email as to whether or not to approve the increase. This process should not take more than 24 hours. If the budget is exceeded without receiving board approval, only the amount originally approved can be reimbursed.

When submitting this form, please include all original receipts and/or professional invoices. If items not part of the project were purchased on the same receipt/invoice, please make note on a separate piece of paper. Please do not write on the receipts and/or invoices. Staple all receipts and/or invoices along with any separate pages breaking out non-project expenses to this form. Please submit the completed form to the treasurer.



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