



West De Pere Booster Club
Supporting Phantom Athletics!

Request for Reimbursement

Instructions: Number your receipts (or copies of receipts), fill out the information below with a grand total (use additional pages if needed), enter your name and address below, attach numbered receipts, and mail to:

Julie Schmitt
 1023 Traboh Ct., De Pere, WI 54115
 Cell: 676-1745

Receipt #	Receipt \$\$	Description of Purchase
Total	\$	

Description of purchase = concession supplies, equipment, etc. so we can determine account to post to in the system.

Name of Requestor: _____

Address where check should be sent:

Address: _____

City: _____ State: _____ ZIP: _____

This form can be downloaded from the WDP Booster Club website
 under GET INVOLVED at
<http://www.wdpsd.com/highschool/boosterclub/Get-Involved.cfm>