



Loyola Guild

of Jesuit High School

General Fund ~ Reimbursement Form

Instructions: Please provide the following information and attach receipts or invoice. Forward to the treasurer within three weeks of the event. Keep a copy for your files.

Event/Office: _____ Event Date: _____

Requestor/Title: _____

Date of Request: _____ Total Amount of Check Requested: _____

Type of Expense:	Amount	Description/Vendor
<input type="checkbox"/> Food/Beverage	_____	_____
<input type="checkbox"/> Printing	_____	_____
<input type="checkbox"/> Invitations	_____	_____
<input type="checkbox"/> Programs	_____	_____
<input type="checkbox"/> Decorations	_____	_____
<input type="checkbox"/> Equipment Rental	_____	_____
<input type="checkbox"/> Mailing Costs	_____	_____
<input type="checkbox"/> Supplies	_____	_____
<input type="checkbox"/> Publicity	_____	_____
<input type="checkbox"/> Gifts	_____	_____
<input type="checkbox"/> Other	_____	_____

Check should be made payable to : _____

Mailing Address of Payee: _____

TREASURER'S RECORD:

Check No. _____ Date Issued: _____ Mailed Yes No _____ Date _____

Other: _____