



# Fishers High School Band Boosters Reimbursement Request

Date Submitted: \_\_\_\_\_

Requester Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Evening Phone #: \_\_\_\_\_

Purchase Date	Vendor/Store	Description/Purpose/Budget Line Item	Amount
<b>Total</b>			

Director/Booster Officer Approval: \_\_\_\_\_

Payment Method/Delivery (check one):

Check by Mail (Include self-addressed, stamped envelope for faster service)

Payee (if different from requester): \_\_\_\_\_

Street: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Check In-Person (e-mail [treasurer@fishersband.org](mailto:treasurer@fishersband.org) to arrange)

Check sent home w/ student

Student Name: \_\_\_\_\_

Credit Student Account

Student Name: \_\_\_\_\_

Treasurer Use Only	
Check #:	Date Issued:

**INSTRUCTIONS**

1. Complete this form, including approval, attach **original receipts**, and place in payment drop box, Treasurer folder in Band office, or mail to ATTN: Treasurer, PO Box 188, Fishers, IN 46038
2. The FHS Band Boosters is a tax-exempt organization. Sales tax will not be reimbursed. If you need a copy of our exemption certificate prior to making purchases, email [treasurer@fishersband.org](mailto:treasurer@fishersband.org).