LIBERTY HIGH SCHOOL LION BACKERS INC
D.B.A. Liberty Athletic Boosters

REIMBURSEMENT REQUEST FORM

Date: _____

To: Sheila Burrows, Treasurer
treasurer@libertyathletics.com

Requested by/check payable to: _____

Phone #: _____

Purpose / reason for expense: _____

List each item separately and attach copy of receipt:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

TOTAL _____

Treasurer Use Only:

Agreed to receipts: _____ Date paid: _____ Check #: _____