

**REQUEST FOR REIMBURSEMENT
OR CHECK REQUISITION**

BALLET WOMEN'S COMMITTEE

DATE: _____ **AMOUNT** _____

PAYEE _____

ADDRESS _____

**Description of
Expenditure:** _____

**Committee Requesting
Reimbursement:** _____

Committee Chairman Approval: _____

**Please attach all receipts to this document and return
to the Treasurer.**

Check#: _____

Check Date: _____

**President or
Treasurer approval:** _____