

**IRON MOUNTAIN ATHLETIC BOOSTER CLUB**  
**REIMBURSEMENT REQUEST**

***A DATED, DETAILED RECEIPT MUST BE INCLUDED FOR REIMBURSEMENT***

DESCRIPTION OF ITEM REQUESTED:

\_\_\_\_ Team Meals (2 meals at \$7.50/person for out of town events – IMHS Athletic Booster Club does NOT cover tips.)

Vender: \_\_\_\_\_

Coach: \_\_\_\_\_

Sport: \_\_\_\_\_

Number of Players: \_\_\_\_\_

Number of Coaches: \_\_\_\_\_

\_\_\_\_ Team Meal #1

\_\_\_\_ Team Meal #2

\_\_\_\_ Other:

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TOTAL PRICE: \$ \_\_\_\_\_

PAY TO: Name: \_\_\_\_\_

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

\*\*\* SUPPORTING DOCUMENTATION ATTACHED: \_\_\_\_ YES \_\_\_\_ NO\*\*\*

REQUESTED BY: \_\_\_\_\_ DATE REQUESTED: \_\_\_\_\_  
(Employee Signature)