

**Shasta High School Choir
Reimbursement Form**

Today's Date:	
Name:	
Address:	
Phone Number:	
E-mail:	

Event (Circle One):	<input type="checkbox"/> Madrigal Dinner	<input type="checkbox"/> Musical	<input type="checkbox"/> General Choir Purchase
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Date of Purchase:	Item and Purpose: (What was purchased and what was it used for)	Price:
Total:		

Signature: _____

Date: _____

Approving Signature: _____

Date: _____