

2011 St. Clare Benefit Auction Expenses REIMBURSEMENT REQUEST

Fill out this form as completely as possible to ensure your request is processed in a timely manner!

For your security, submit form & receipts in an envelope to the "Auction" in-box in the School Office or mail directly to the address below; do not hand-deliver to an Auction Team Member! Reimbursement requests will be processed and filled once a week. If you have more expenses than the form allows, go ahead and use the back of this form.

Auction Departments:	Payable To:		Today's Date:	
	Address:		Total Amount Due: \$	
Art Projects			Preferred De	livery Method:
Cashiering/Banking	Phone:		☐ Backpack	-
Catalog	Email:		☐ Other:	
Computer	Expenses	S (fill in each receipt separately	·):	
Data Entry	Department: Amount: \$ Used for:			
Decorations				
Facilities	Donartm	mont:		Amount: \$
Graphic Design	Department: Used for:			Amount. \$
Guest Services				
Mailing	Departm Used for	ment: or:		Amount: \$
Marketing		//·		
Memory Projects	Departm	ment:		Amount: \$
Oral Auction	Used for	or:		
Printing	Denartm	ment:	I.	Amount: \$
Procurement	Used for	or:		Ψ
Raffle				
Silent Auction]	Гоtal: \$
Thank You's	OFFICE USE ONLY			
Volunteers	Date received:		Expense Processed:	
	Expense Authorized by:		Check Delivered:	