



# USC HS Girls Lacrosse Reimbursement Form

Forms should be submitted within 2 weeks following expense. Please attach receipts and submit to the Treasurer.

Date	
Event/Type of Expense	
Submitted by	
Phone	
Email	
Send Check to (name)	
Address	
City/State/Zip	

Description of Purchase	Amount
<b>Total</b>	

Treasurer Use Only		
Check Number	_____	Amount _____ Date _____
Budget Category	_____	
Approval	_____	