

# Rockford IceHogs Booster Club

P.O. Box 6172

Rockford, IL 61125

Email: rockfordicehogsboosters@yahoo.com

Website: <https://icehogsboosterclub.org>



## Request for Reimbursement Form

Please fill out this form with proper information. Sign and date it, give to the appropriate chairperson with receipt(s) for approval to submit to the RICB Treasurer for reimbursement.

Request	Committee	Date(s)	Amount
<b>Total:</b>			

Booster Member Print: \_\_\_\_\_

Date: \_\_\_\_\_

Booster Member Sign: \_\_\_\_\_

Date: \_\_\_\_\_

Committee Chairperson Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Treasurer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**2<sup>nd</sup> Signature required when board members request reimbursement:**

President Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Vice President Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Official Use:** Check #: \_\_\_\_\_

Date: Issued: \_\_\_\_\_

All receipts along with this form must be submitted within 30 days to receive reimbursement