**GALE RANCH MIDDLE SCHOOL**

**EDUCATION FUND**

REQUEST FOR REIMBURSEMENT

(Receipts must be attached to all requests)

|  |  |
| --- | --- |
| DATE |  |
| EVENT |  |
| EXPLANATION |  |
| AMOUNT |  |
| REQUESTED BY |  |
| PRESIDENT APPROVAL |  |
| TREASURER APPROVAL |  |
| CHECK NUMBER |  |
| DATE PAID |  |
| ADDITIONAL COMMENTS |  |