



RAPTOR ACTIVITIES BOOSTER CLUB

in support of
Silver Creek High School

REQUEST FOR FUNDS DISBURSEMENT

Type of Disbursement Request:

- Disbursement of Funds from Team/Club Account
 Non-Budgeted General Fund Request
 Budgeted Disbursement
-

REQUIRED FOR ALL DISBURSEMENTS:

Amount Requested: _____

Team/Club: _____

Date Submitted: _____

Turned into RABC Box (date stamped by office staff) _____

****Completed and Approved requests must be submitted and date stamped by an office staff before the end of the school day on Tuesday and placed in the RABC mailbox, located in the school front office, Attn: RABC Treasurer in order for reimbursements to be paid out by Friday of same week.**

Reason for Request: _____

Please attach copy of receipt(s) or invoice(s).

Check Payable To: _____

Mailing Address: _____

(or return instructions)

SIGNATURES – REQUIRED FOR ALL DISBURSEMENTS FROM TEAM/CLUB ACCOUNTS:

Coach/Sponsor: _____

Parent Representative: _____

Treasurer Notes:

Date Paid: _____

Check Number: _____