

Wootton High School Booster Club

Reimbursement Form

Date of Request: _____

Team: _____

Event: _____

List items that require reimbursement:

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL:	\$ _____

Make checks payable to: _____

Address for checks to be mail to: _____

If you have any questions, please contact David Scher, Booster Club Treasurer at davidhscher@gmail.com or 240-277-3500

Mail this form to: Wootton Booster Club, 2100 Wootton Parkway Rockville, MD 20850