Liberty School District Booster Club, Inc. Individual Account Request Form

This form is for teams & clubs to submit requests for reimbursement from accounts held by the LSDBC Inc.

Please note - the LSDBC, Inc. will approve requests at its regularly scheduled meetings.

Please submit this completed form to an officer of the LSDBC, Inc. ONE week prior to a regularly scheduled booster meeting to get the request on the agenda for approval.

Please complete the information below:

Receipt attached If no, please descri	be	Yes	No	
Date of request				
Team/Group Name:				
Desciption of purpos (example: uniform				
Amount Requested:				
Check payable to:				
Signature:				
oignature.			Name	Date
Contact information Name	(if questions or	add'l informa	tion is needed to p	process request):
Phone				
Email				
Booster officer conta Pres VP Treas	act information Chanda Heer Danica Foland Cheri Burnham		509-998-7639 da	neer@bmc.portland.ihs.gov anicafoland@yahoo.com neri.burnham@mossadams.com
For Booster purpose Request rec'd Officer receiving rec Added to agenda Approval rec'd				