

Charlestown Pirate Pride Booster Club

- Sport Funds CLAIM Form -

This form is to be completed and submitted with each invoice or request for reimbursement and (along with the original invoice or actual receipts) submitted to Pirate Pride Booster Club Treasurer in a timely manner.

(Sport Account expense to come from)

(Name of payment recipient)

(Address of payment recipient if not on invoice)

\$ _____
(Total amount of claim)

Both the sport's varsity coach and the Pirate Pride Parent Representative for the sport must sign below as an indication of their mutual desire to have this claim paid from that sport's account within the Pirate Pride Booster Club treasury.

(Varsity Coach Signature)

(Parent Representative Signature)

(Printed Name)

(Printed Name)

(Date)

(Date)

Please Note: If this claim involves an expenditure that is part of a prior approved Pirate Pride-Sport Cost Share arrangement, a copy of that approved arrangement form must also be attached to this form.

Do not enter anything below this line. This space for Treasurer accounting/tracking.

Date Received: _____ Payment Date: _____ Check# _____

Other: _____
