Santiago Baseball Booster
1395 Foothill Parkway Corona, CA 92881
951-739-5600

MONEY REQUEST FORM

Date: _____

Amount: _____

Requested by: _____

Make check payable to: _____

_____

Purpose of expense: _____

_____

Budget area: _____

_____

Board majority voted and approved to expense on date: _____

Circle One: e-mail meeting

Approved by: (must be approved by President + 1 additional member other than treasurer or person requesting)

Anna Kuck, President Signature: _____

Member Name (print): _____ Member Signature: _____

All requests must be accompanied by a proposal from said company or receipts that backup the requested funds.