



FALCON ATHLETIC BOOSTERS CLUB, INC.

Payment and Reimbursement form

Please attach all associated invoices or receipts.

Email only (this signed form + receipts) to: treasurer.spboosters@gmail.com

RECEIPTS MUST BE ATTACHED. As a reminder, FABC is a tax-exempt organization; tax exempt status must be requested anytime feasible.

Date _____ Sports Team _____

Project/Description of Expense: _____

Make Check Payable to: _____

Mailing Address of Recipient: _____

Recipient Cell Phone: _____

Approved by: _____

(must be current Team Booster Rep)

Booster Rep Cell #: _____

Expense Amount Total: _____

For additional information, please feel free to email treasurer.spboosters@gmail.com

All approved expenses will be reimbursed directly through Truist Bank direct-pay; checks will be issued and mailed approximately one week after input by Treasurer.

For Boosters Treasurer Use Only:

Check# _____ Date Paid: _____