

## **SST Reimbursement Request**

## Stingray Swim Team EIN: 920097771

PO Box 72301 Fairbanks, AK 99707 970-689-1407 coachjosh@aksst.com

DATE **REIMBURSE TO** CONTACT

| date  |  |
|-------|--|
| name  |  |
| phone |  |
| email |  |

**REQUEST TO** Stingray Swim Team

Cheryl Schachle PO Box 72301 Fairbanks, AK 99707 907-460-6382

| DATE | DESCRIPTION            | PAID     | LINE TOTAL |
|------|------------------------|----------|------------|
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      | REIMBURSEMENT RECEIVED |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        |          |            |
|      |                        | CURTOTAL | £0.00      |

Return Completed Form and All Receipts to: Cheryl Schachle | treasurerstingrays@gmail.com

\$0.00 **PAYMENTS** \$0.00 TOTAL \$0.00