



Barrington Quarterback Club Reimbursement/Payment Form

To Request Payment:

- Complete form and return to OB Club Treasurer
- All receipts **MUST** be attached

Check Payable to: _____
Address: _____
Check Amount: _____
Budget Category: _____
Explanation of Expenditure: _____

Your signature: _____
Coach/President signature: _____

For Treasurer Use Only:

OB Club
Check No. _____
Date Paid _____
Entered _____