REQUEST FOR APPROVAL FORM

REDONDO UNION HIGH SCHOOL CROSS COUNTRY, TRACK & FIELD BOOSTER CLUB

REQUESTER FILLS IN THIS SECTION

Name of requester: ______ Date of request: _____

Requester's phone number: E	mail
Purpose:	
Item1:	Cost: \$
Item2:	Cost: \$
Item3:	Cost: \$
	Cost: \$
(Attach another sheet if more room is needed) Signature of requester:	
acknowledgement of receiving final status. If req with the check request form within 30 days (unle made with the booster board members). FOR RUHS CCT BOARD IN Status of Request: ACCEI	MEMBERS USE ONLY PTED DECLINED
RUHS CCT Booster Boards Signatures: President:	Date:
Vice President:	Date:
Secretary:	Date:
Treasurer:	Date:
Charged to what budget item:	
Final Status sent to: Treasurer for processing and Secretary to file.	