

# OPRFHS APPLAUSE!

## Student Account Withdrawal Request

|                                |  |                         |  |
|--------------------------------|--|-------------------------|--|
| <b>Student Name:</b>           |  |                         |  |
| <b>Parent Name:</b>            |  |                         |  |
| <b>Address:</b>                |  |                         |  |
| <b>Request Amount:</b>         |  | <b>Graduation Year:</b> |  |
| <b>Purpose of expenditure:</b> |  |                         |  |

| Line         | Vendor | Description | Amount |
|--------------|--------|-------------|--------|
| 1            |        |             |        |
| 2            |        |             |        |
| 3            |        |             |        |
| 4            |        |             |        |
| 5            |        |             |        |
| <b>Total</b> |        |             |        |

**Instructions:**

1. Students may request reimbursement for up to the full balance in their student fundraising account.
2. Account reimbursement may be made for any expense related to the student's participation in Performing Arts
3. Send request to: Kim Cottee, APPLAUSE! book keeper, [skc231@live.com](mailto:skc231@live.com) or 216 Clinton Ave, Oak Park, IL 60302..
4. If reimbursement is for money paid to one or more vendors, please include vendor names as they appear on the receipt(s).
5. Please include copies of all receipts.
6. Checks may take up to two weeks to process so please plan accordingly.

Questions about account balances or reimbursement items should be directed to Kim Cottee at [skc231@live.com](mailto:skc231@live.com)