



Good Shepherd Catholic Church
 12800 W. 75th Street
 Shawnee, KS 66216
 Phone: 913.631.7116
 Fax: 913.631.3539

Reimbursement

Date: _____
 Name: _____
 Address _____
 City, State, Zip _____
 Phone: _____
 Email: _____

**Please keep a copy of
 this form and all
 receipts for your
 committee files.**

Please return this form with original receipts to:
 Lollapalooza Chair
 C/O Good Shepherd Church Office

Email: gslollapalooza@kc.rr.com

Budget/Category	Vendor Name	Description <small>Describe and indicate purpose (i.e. plastic cups - bar, flowers - table centerpieces)</small>	Amount
Live Auction			
Silent Auction			
Raffle			
Sign Up Event			
Benefactor Party <small>(food, beverage, all expenses)</small>			
Food			
Beverages			
Tents/Lines/Supplies			
Decorations			
Copies/Printing/Postage			
Other _____		<small>Describe and indicate purpose (i.e. printing - bulletin, copies - donation forms)</small>	
Other _____			

Please Mail Check to the Address Above

TOTAL \$ _____

Special Check Instructions _____