FOOTLITE
MUSICALS

Footlite Musicals, Inc.

Expense Reimbursement Form

Instructions **Date** _____

1) Please lest the expenses for which you are requesting reimbursement. Be as specific as possible. Use a separate line for each type of expense.
2) Attach a receipt for each expense. If there are non-Footlite expenses on a receipt, note the Footlite portion on the receipt and transfer the total to this form.

Name _____

Street Address _____

City _____ **State** _____ **Zip** _____

Email Address _____ **Telephone** _____

Paper Check ☐ **Direct Deposit** ☐

If you are selecting direct deposit, please ensure that you have completed a direct deposit authorization form

Expense Category (see list)	Description	Amount	Show

Approved by _____ **Total** - **Date Paid** _____

Expense Categories

Costumes, Wigs, Makeup
Sets & Props
Sound & Lighting
Promotions/Lobby Sales
Show Publicity
Other Production Expenses
Hospitality/Strike
Postage
Special Event Expense