



## Funding Procedures 2018-2019

The WWHS Athletic Booster Club supports all athletic programs at Woodrow Wilson High School by allocating funds to each team for needs not otherwise financially supported by the school district or by the fundraising efforts of the team.

### **Approvals**

The Booster Club approves funding requests for each sports team based on the needs identified and supported by the coach of that team. Booster Club funds may only be used for items not otherwise covered by the district or the fundraising efforts of the team. Expenditures submitted to the Booster Club for reimbursement without prior approval may or may not be reimbursed. To ensure reimbursement, seek approval in advance of incurring the expenditure.

Requests for funding in excess of \$500 require the written approval of both the Woodrow Wilson Athletic Coordinator and the respective Team Coach.

### **Funding Requests**

Submit all funding requests to the Booster Club Treasurer on the attached Funding Request form. All requests should include supporting documentation – invoices, purchase orders – and all required signatures and must be submitted **digitally** to the Booster Club Treasurer's email (below).

### **Deposits**

All monies for deposit in the Booster Club account must be delivered to the Booster Club Treasurer and accompanied by a completed Deposit Form, which is attached. Please contact the Booster Club Treasurer to coordinate the deposit.

### **Contact Information**

The 2018-2019 Booster Club Treasurer is Brad Adams. He can be reached by email at [wwboostertreasurer@gmail.com](mailto:wwboostertreasurer@gmail.com) or by phone or text at (214) 734-7544.

**Thank you for your cooperation!  
Go Wildcats!**



## FUNDING REQUEST

**SPORT:** \_\_\_\_\_ **COACH:** \_\_\_\_\_

	<u>REQUESTED CHECK PAYEE:</u>	<u>PERSON MAKING REQUEST:</u> <i>(if different from requested payee)</i>
Name:	_____	_____
Address:	_____	_____
	_____	_____
Phone:	_____	_____
Email:	_____	_____

ITEMS	VENDOR / PLACE OF PURCHASE	AMOUNT

**ATTACH ALL SUPPORTING INVOICES / ORDERS / RECEIPTS**

**TOTAL:** \_\_\_\_\_

Purpose of Expenditure and Other Remarks: \_\_\_\_\_

<b>Signature of Requestor</b>	<b>Date</b>

<i>If over \$500:</i>	
<b>Signature of Athletic Coordinator</b>	<b>Signature of Coach</b>

<b>FOR TREASURER'S USE ONLY</b>	
Date Received: _____	Check Number: _____
Approved By: _____	Check Amount: _____
Treasurer Initials: _____	Check Date: _____

