

**ST. JOSEPH'S SCHOOL  
HOME AND SCHOOL ASSOCIATION  
EXPENDITURE APPROVAL FORM \*\***

**\*\* PLEASE NOTE: St. Joseph's does not reimburse sales tax.**

Please take a Sales Tax Resale Exemption Certificate - Form ST101 and present it to vendor to avoid being charged sales tax.

**COMMITTEE/EVENT:** \_\_\_\_\_

**PAY TO:** \_\_\_\_\_ **SUBMITTED BY:** \_\_\_\_\_

Please fill out form completely, attach all original receipts and submit to event chairperson.

**Do not turn in to front office until signed by event chairperson!**

Chairperson will sign and place in folder in office and will await treasurer's signature.

Signatures must be completed prior to reimbursement.

**Please allow at least one week for checks to be processed.**

**DESCRIPTION OF ITEMS/SERVICES PURCHASED:** \_\_\_\_\_

\_\_\_\_\_ **Festival of Trees**  
 \*Craft Supplies \$ \_\_\_\_\_  
 \*Registration Fee \$ \_\_\_\_\_  
 \*Other (describe below) \$ \_\_\_\_\_

\_\_\_\_\_ **Fall Dinner**  
 \*Grocery Supplies \$ \_\_\_\_\_  
 \*Non-food Supplies \$ \_\_\_\_\_  
 \*Carnival Supplies \$ \_\_\_\_\_  
 \*Office Supplies \$ \_\_\_\_\_  
 \*Decorations \$ \_\_\_\_\_  
 \*Wine/Beer permit \$ \_\_\_\_\_  
 \*Other (describe below) \$ \_\_\_\_\_

\_\_\_\_\_ **Father Daughter Dance**  
 \*Decorations \$ \_\_\_\_\_  
 \*Entertainment \$ \_\_\_\_\_  
 \*Food \$ \_\_\_\_\_  
 \*Other (describe below) \$ \_\_\_\_\_

\_\_\_\_\_ **Crab Feed**  
 \*Space Rental \$ \_\_\_\_\_  
 \*Non-food Supplies \$ \_\_\_\_\_  
 \*Office Supplies/Services \$ \_\_\_\_\_  
 \*Live Auction \$ \_\_\_\_\_  
 \*Auctioneer \$ \_\_\_\_\_  
 \*Silent Auction \$ \_\_\_\_\_  
 \*Raffle \$ \_\_\_\_\_  
 \*Decorations \$ \_\_\_\_\_  
 \*Art Project **(\$150 Max)** \$ \_\_\_\_\_  
 \*Other (describe below) \$ \_\_\_\_\_

\_\_\_\_\_ **Walk-a-thon/Fun Run**  
 \*Grocery Supplies \$ \_\_\_\_\_  
 \*Non-food supplies \$ \_\_\_\_\_  
 \*Office Supplies/Services \$ \_\_\_\_\_  
 \*Other (describe below) \$ \_\_\_\_\_

Other: \_\_\_\_\_

**TOTAL AMOUNT:** \$ \_\_\_\_\_

**(Excluding sales tax\*\*)**

**APPROVED BY:**  
 Maybe approved by email.

Event Chairperson: \_\_\_\_\_ Date: \_\_\_\_\_

Treasurer: \_\_\_\_\_ Date: \_\_\_\_\_

HSA President: \_\_\_\_\_ Date: \_\_\_\_\_

(Amounts over \$500 **must** have HSA President signature.)