SHUSWap	Production Expense Reimbursement Form (revised Feb/22) Title of Production		
shuswap theatre			
Instructions:			
 Fill out form 			
Attach receipt			
The state of the s		ducer's approval (do not put in Treasurer's box)	
4. Producer will submit to			
Please indicate which DEPAR	_		
□ Set Construction	□ Sound	□ Backstage/Rehearsals	
□ Set Décor	Publicity	Opening Night	
□ Props	□ Programme	□ Hair/Makeup	
□ Costumes	□ Foyer Display	Photography	
Lighting	□ Poster	□ Programme	
Name:		Date:	
Items Purchased:			
Vendor:			
Amount charged: \$		Or Amount Paid: \$	
Please mail cheque to:			
OR ☐ Send e-Transfer to			
OR Please email me at			
OR Please leave cheque at t	he theatre for me to nick i	<u> </u>	

Producer's Signature:

Date Issued:

Your Signature:

Cheque#:

SHUSWAD	Production Expense Reimbursement Form (revised Feb/22)			
shuswap theatre	Title of Production			
Instructions:				
1. Fill out form				
2. Attach receipt				
 3. Leave completed form in bottom slot – for producer's approval (do not put in Treasurer's box) 4. Producer will submit to treasurer for payment 				
Please indicate which DEPARTMENT to charge:				
☐ Set Construction	□ Sound	□ Backstage/Rehearsals		
□ Set Décor	□ Publicity	□ Opening Night		
□ Props	☐ Programme	□ Hair/Makeup		
☐ Costumes	☐ Foyer Display	□ Photography		
□ Lighting	□ Poster	□ Programme		
Name:		Date:		
Items Purchased:				
Vendor:				
Amount charged: \$		Or Amount Paid: \$		
Please mail cheque to:				
OR Send e-Transfer to				
OR Please email me at				
OR Please leave cheque at the theatre for me to pick up				
		ducer's Signature:		
		e Issued:		