

Passaic County Technical Institute
45 Reinhardt Road, Wayne, NJ 07470
973-790-6000

MONETARY DISBURSEMENT FORM

Event _____ Advisor _____

Date(s) _____ Money per person \$ _____

I certify that I have received \$ _____ for the purpose of purchasing (please check) _____ Meals _____ Other Describe: _____

<u>Student Name</u>	<u>ID#</u>	<u>Student Name</u>	<u>ID#</u>
_____	# _____	_____	# _____
_____	# _____	_____	# _____
_____	# _____	_____	# _____
_____	# _____	_____	# _____
_____	# _____	_____	# _____
_____	# _____	_____	# _____
_____	# _____	_____	# _____
_____	# _____	_____	# _____
_____	# _____	_____	# _____

Total Amount Disbursed \$ _____

Signature of Advisor _____

Return this completed form to the Supervisor of Student Activities at the conclusion of the event.

- Meal Allotments:
- Breakfast ----- \$ 10.00
 - Lunch ----- \$ 15.00
 - Dinner ----- \$ 22.00