SKEGEE
GOLDEN TIGERS, INC.
Partnering for Student Success

Advanced Payment Reconciliation Form

Date_____ **CHECK #**_____

Name_____

Committee_____

Itemized total of all Receipts (attach original copies and use additional pages if needed)

Item Purchased	Amount of Receipt
TOTAL OF RECEIPTS	
TOTAL OF ADVANCED PAYMENT	
OPTION 1: AMOUNT OWED BACK TO SGT	
OPTION 2: AMOUNT OF YOUR REFUND* (If you do not want your refund, put $0.00 here and initial)	
*REFUND CHECK NUMBER (to be completed by the treasurer)	

All receipts and/or money must be returned back to the SGT Finance within 30 days. No additional committee advance payments will be issued until these items are received.
Revised 1/2017