<table>
<thead>
<tr>
<th>Location</th>
<th>Price</th>
<th>Qty.</th>
<th>Ticket #</th>
<th>Extended Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regal Cinema</td>
<td>$9.00</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total:

Name: ____________________________  EMPL ID#: ____________________

Signature: __________________________  Date: ____________________

Payment Type (Circle One):

- CaseCharge
- CaseCash
- Check
- Visa
- Cash
- MasterCard

Office Use Only:

NOTE: Please remember to attach receipt.

Completed By: ____________________  Date: ____________________