



REQUEST FOR REIMBURSEMENT OF PTA EXPENSES

Date: _____

Amount Requested: _____

Checks Made Payable to: _____

Committee: _____

Committee Chair Approval _____

Reason: _____

Please make sure all receipts are attached and you retain a copy for your records

How would you like to receive your reimbursement?

Send home with my child _____ in class _____.

Please put in my school mailbox or mail to my home address

Treasurer's Use:

Date Received: _____ **Check #** _____ **Amount:** _____