PTA Expense Reimbursement Form

Kindly complete this form when requesting reimbursement from the PTA for any expenses incurred on its behalf.
All receipts must be submitted in **paper format** and attached to this form - emailed receipts will not be accepted.
Submit the completed form and receipts to the PTA Treasurer **within 30 days of the purchase or event date**.
Please allow 2 weeks for the forms to be reviewed and payment(s) processed.
Charges **exceeding the budgeted amount must be approved** by the Board in advance.
Note: PTA is not responsible for any interest charges incurred on personal credit cards.

Requester Name: _____

Phone #: _____ **Email:** _____

Expense or Event: _____

Purpose of Expenditure: _____

_____

Total Reimbursement Amount: _____

Make Check Payable To: _____

Check Delivery:

☐ Mail To: (Name & Address) _____

☐ Give To: (Name & Place) _____

Signature: _____ **Date:** _____

For Treasurer use only:

Check No.: _____ Date Issued: _____

Notes: _____