

Robious Middle School PTA

EXPENSE REIMBURSEMENT
REQUEST FORM

Date: _____

Name: _____

Check Payable To: _____

Total Reimbursement Amount: \$_____

Expense For:

Committee: _____
(Example: Staff Appreciation)

Function/Purpose: _____
(Example: Luncheon)

Committee Chair Signature: _____

Executive Board Signature #1: _____

Executive Board Signature #2: _____

Directions:

1. Complete & sign this form.
2. Attach ALL *original* receipts.
3. Return form with receipts to Treasurer's folder in PTA box in the front office.

<p>Treasurer Use Only</p> <p>Check Paid #: _____</p> <p>Date Paid: _____</p> <p>Date Entered: _____</p>
--