

Frances Hazel Reid Elementary PTA

Reimbursement Form

For the year ending June 30, 2018

<i>(For PTA Treasurer's Use only)</i>			
Date received:	_____	Check #:	_____
Date issued:	_____	Amount:	_____
Date cleared:	_____	QB entered:	_____

Please place the completed form and documentation, including all contracts, invoices, and receipts, in an envelope, ATTN: Stacie A. Yamin, in the PTA mailbox in the FHR office. If you require a check immediately, please contact me directly at saa37@hotmail.com In an effort to reduce costs, reimbursements will be sent home with your child (if applicable).

Sales tax will not be reimbursed. If you need a copy of a tax-exempt form, please contact a PTA officer or your Event Chair.

No checks will be written without a completed form and proper documentation.

Date of request: _____ **Date invoice is due:** _____

Event: _____ **Event date:** _____

Itemized expenses: *(Please use back of the form for additional line items.)*

<u>Expense description:</u>	<u>Amount:</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total amount requested:	\$ _____

Reimbursement requested by:

Name: _____

Phone number: _____ Email address: _____

Child's name: _____

Grade: _____ Teacher: _____

Payment made to:

Name: _____

Address: _____

Phone number: _____

PTA President's signature

Date approved: