

Request for Payment / Expense Reimbursement

Endeavour Elementary PTSA

INSTRUCTIONS: Please complete all unshaded portions of form. Attach original invoices, receipts, or billing statements. Remember to include sales tax on reimbursable items. Form must be signed by the requesting staff person, the appropriate PTSA Committee Chair, or a member of the PTSA Executive Board. Place completed form and supporting documents in the PTSA mailbox in the workroom or in the PTSA Treasurer's folder in the PTSA room. Incomplete forms and those lacking necessary documentation will be returned. Reimbursements by check will be placed in the staff person's mailbox or in the appropriate committee folder in the PTSA room or mailed if a self-addressed, stamped envelope is provided. If you need assistance or have questions, please contact the PTSA Treasurer.

Detail of Expense

Budget category: _____ Total Amount Reimbursed: _____

Payee Name: _____

Payee Email: _____ Payee Phone #: _____

Items or programs to be reimbursed: _____

Method of Payment

- Pay attached bill (attach invoice, etc)
- Mail me a check (enclose self-addressed stamped envelope)
- Leave Check at School (kid mail or folder in PTSA office – specify in instructions)
- Other (please describe): _____

Special Instructions

Committee Chair Signature

Printed name: _____ Phone: _____

Signature: _____ Date: _____

PTSA Treasurer's Use Only

Check Number: _____

Check Date: _____

Check Amount: _____