

Request for Reimbursement, Funds, or Vendor Payment

REIMBURSEMENT INSTRUCTIONS:

Please attach original receipts or invoices to this form. This will help the treasurer keep accurate account information for line items. If you need cash to make change at a PTA event, please give the treasurer at least one (1) week notice prior to the activity/project.

☐ Reimbursement ☐ Check Request ☐ Debit Card Payment ☐ Cash / Change for a PTA Event

Date of Request: _____ Date required: _____

Amount Requested: _____ Committee Name: _____

Line Item (if different than Committee Name): _____

Purpose: _____

Pay to: _____

Email and/or phone number: _____

** Requested By: _____ Signature: _____

METHOD OF RECEIVING CHECK:

☐ Student Mail: Student Name: _____ Teacher Name: _____
(Please note: If check is lost via student mail you will be held responsible for all Stop Payment fees incurred from the bank.)

☐ Pick up from PTA Treasurer directly or from PTA mailbox in LCE Staff Workroom

☐ Other (mail, etc): Please contact PTA Treasurer directly to discuss options. (Treasurer@LittleCedarsPTA.org)

FOR TREASURER USE ONLY

Date received: _____

☐ Reimbursement - Made To: _____
Check # _____ Check Amount \$ _____
Budget Line Item: _____

☐ Cash for Change at PTA Event - Purpose: _____

President Signature _____