

Little Cedars Elementary PTA

Reimbursement Voucher / Check Request

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

Date of Request:		Date Needed:	
	\$		
	at than committee name):		
	е То:		
Phone number and/o	r Email Address:		
Please note: If check is log Pick up from PTA 3) Other (mail, etc):	CEIVING CHECK Student Name: Ost via student mail you will be held response. Treasurer directly or from PTA resourcer directly to discuss options.	ponsible for all Stop Payment fees in mailbox in LCE Staff Workro	om
Requested By:		_ Signature:	
	Note: Original receipts must be atta	ched or there can be no reimburse	ment.
	Check # Check #	Amount \$	