

Check # \_\_\_\_\_  
(Treasurer Reference only)

**PTA Expense Reimbursement Form  
2018-2019 School Year**

Name: \_\_\_\_\_  
*(Print clearly as you would like it to appear on the check)*

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Date: \_\_\_\_\_

PTA Committee: \_\_\_\_\_

**Description of Expense Incurred**

*(i.e. refreshments for Popsicle Social, supplies for Fall Carnival, etc)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Reimbursement Request \$ \_\_\_\_\_

**PLEASE TAPE receipt(s) to the back side of this form**

Would you like your reimbursement check mailed to you or dropped off in the PTA box in the school office? *Please check:*

PTA box

Mailed

Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return this form, with receipts attached, to the PTA mail slot in the Steele Office: Attention of Mary Beth Thacker – PTA Treasurer.

[SteeleTreasurer@gmail.com](mailto:SteeleTreasurer@gmail.com)