



## PUESTA DEL SOL ELEMENTARY PTA REQUEST FOR REIMBURSEMENT / PAYMENT

- Please fill out form completely and attach all original receipts.
- Reimbursement / payment request must be submitted within the school year that the expense is incurred.
- Allow one week to process request.

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

Requested by: \_\_\_\_\_ Phone: \_\_\_\_\_

Check Payable to: \_\_\_\_\_

Check Delivery Method:

Put check in PTA / Staff box

Mail to address:

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

ITEM DESCRIPTION	BUDGET CATEGORY / COMMITTEE	AMOUNT
		\$
		\$
		\$
		\$
		\$
		\$
	TOTAL	\$

### For Treasurer's Use Only

Date Paid:	Check #:
Budget Category:	Amount: