

## 09-10 PTA REIMBURSEMENT VOUCHER

**Please attach receipts or invoices to this form.** This will help the treasurer in keeping accurate account information for any type of reimbursement. Expenses should not exceed the amount approved for the Event or Mini-Grant. **Cost overages need approval by the PTA Board prior to overages occurring.** Please provide receipts within 30 days of purchasing items. Questions can be addressed to:

Danielle McOuat, Treasurer

[dmcouat@hotmail.com](mailto:dmcouat@hotmail.com)

206-371-1901

**Event Reimbursement**

**Mini-Grant Reimbursement**

**Teacher Allowance Reimbursement**

**Unallocated Reimbursement**

Reimbursement Requested by: \_\_\_\_\_

Requestor's phone number: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Amount Requested: \_\_\_\_\_

Event or Mini-Grant Name: \_\_\_\_\_

Event Chair/Mini-Grant Primary Contact: \_\_\_\_\_

Contact Approval Signature: \_\_\_\_\_

Make check payable to: \_\_\_\_\_

Summary of items Purchased: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*\* If there are no receipts attached, there can be no reimbursement.*

**FOR TREASURER'S USE ONLY**

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

Reimbursement Made To: \_\_\_\_\_

Check Number: \_\_\_\_\_ Check Amount: \_\_\_\_\_