

Check number

**PTSA Expense Reimbursement Form
2006-2007 School Year**

Name

(print clearly as you would like it to appear on the check)

Phone number

E-mail address

Date

PTSA Committee

Description of Expense Incurred

(e.g. refreshments for Popsicle Social, supplies for Fall Carnival)

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
PTSA box in the school office?**

school office please.

If you would like it mailed to you, please provide your mailing address below:

**Please return this form, with receipts attached, to PTSA mail slot in the office
to the attention of Brenda Mahoney, PTSA Treasurer.**