

WOODLAND SPRINGS PTA
REQUEST FOR REIMBURSEMENT
(*Please attach receipt. Tax cannot be reimbursed*)

Name: _____ Date: _____

Email: _____ Phone: _____

Expenditure was for: _____

Student Name (if applicable): _____ Teacher & Grade: _____

PURCHASE SUMMARY

<u>Item Purchased</u>	<u>Place of Purchase</u>	<u>Amount</u>
	Total:	

(*Receipts must be attached and sales tax can not be reimbursed. ***)

TREASURER NOTES

<u>Date Received</u>	<u>PTA Member</u>	<u>Date Paid</u>	<u>Check Number</u>	<u>Check Amount</u>

APPROVALS

	<u>Name</u>	<u>Signature</u>
Treasurer's Signature		
President's Signature		
Executive Board Member's Signature		