

STILL PTSA REIMBURSEMENT FORM

Please attach all receipts
to the back of this form.
Completed form should be placed
in the PTSA Treasurer's mailbox.

Photocopy for your records, if
necessary, prior to submitting
to Treasurer.

Date _____

Event/Line Item: _____

Reimbursement amount _____

(Note: Sales tax exemption form
should be used when making purchases)

Please itemize expenditure(s)

1. _____
2. _____
3. _____
4. _____
5. _____

Make check payable to: _____

Phone number: _____

Please indicate how you would like this check delivered:

_____ Pick up at school _____ Pick up from Treasurer _____ U.S. mail *

* U.S. mail should only be used for vendors or if absolutely necessary. Please make every effort to
pick up checks from Treasurer.

For U.S. mail: Address: _____

E-mail address for notification when check is ready (if applicable): _____

Treasurer's Use Only

Check date _____ Check # _____ Budget _____