

# Anglo-American School of Moscow PTO Reimbursement Request

*Receipt must be attached to request reimbursement  
Reimbursement requests must be filed within 30 days of expenditure.*

**Requested By:** \_\_\_\_\_

**Payable To:** Name \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

**Receipt Amount:** \_\_\_\_\_ **Receipt Currency:** RUB\_\_\_ USD\_\_\_ GBP\_\_\_ EUR\_\_\_ Other\_\_\_

**Preferred Currency of Reimbursement:** USD\_\_\_ RUB\_\_\_

**Description:** *Provide a brief description of item(s)/service(s) purchased and for what purpose.*

**Grade Level(s) or Division:** \_\_\_\_\_ **Teacher (if applicable):** \_\_\_\_\_

**Activity/Event/Purpose:** \_\_\_\_\_

**Items or service purchased:**

  

**PTO Budget Line:** *'X' budget line to be charged for this payment.*

<input type="checkbox"/> Elementary School	<input type="checkbox"/> Visiting Artists
<input type="checkbox"/> Middle School	<input type="checkbox"/> Spring Social
<input type="checkbox"/> High School	<input type="checkbox"/> International Fair
<input type="checkbox"/> Welcome BBQ	<input type="checkbox"/> Kids Craft Fair
<input type="checkbox"/> Newcomers / Seminars	<input type="checkbox"/> Fall Social
<input type="checkbox"/> Teacher + Staff Appreciation	<input type="checkbox"/> Russian Artisan Fair
<input type="checkbox"/> New Book Fair	<input type="checkbox"/> PTO Store
<input type="checkbox"/> PTO The Exchange	<input type="checkbox"/> Operating
<input type="checkbox"/> Other	<input type="checkbox"/> Discretionary Fund

Signature \_\_\_\_\_

(R.F. 14-15)

*\*for internal use only*

**Expense Authorization:** *PTO Officers, Coordinators, and Event Chairs must approve expenses charged to their respective budgets.*

\_\_\_\_\_  
PTO Officer, Coordinator, or Event Chair Signature

Date \_\_\_\_\_