



Reimbursement Request Form

Please allow up to 30 days to receive your check after the voucher is submitted for reimbursement. Expense reimbursement forms and receipts can be dropped off to the Churchville PTA Treasurer's mail box in the school office OR scanned and emailed to Lisa Gami at gami.lisa@gmail.com.

Date: _____

Requesting Committee (if applicable): _____

Committee Chair Name: _____

Description of Expense: _____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Amount Requested \$ _____

Check payable to: _____

Payee Address: _____

Payee Phone Number: _____

Payee Email Address: _____

Signature: _____ Date: _____

Treasurer Approval: _____	Date: _____
President Approval (if needed) : _____	Date: _____

For Treasurer's Use Only		
Check Number: _____	Date of Check: _____	Budget Code: _____
Budget Description: _____		
