Reimbursement Request Form ZCHS PTO

1 To whom is the check to be written

Name _____

Address_____

2 Purpose (what is/was the money spent for?)

_____

3 Date of Expense _____

4 Amount of Reimbursement Request $ _____

5 Attach receipts to the back of this form

For Treasurer's Use Only:

Budget Category _____ Check # _____ Date _____ Amount $ _____

Treasurer Signature: _____ Date _____

Approved by (PTO Officer): _____Date _____

This form and receipts must be submitted to the Treasurer within 45 days of purchase/end of school year whichever comes first or the reimbursement will be denied. ZCHS PTO is a tax exempt entity and does not reimburse for sales tax.