

Rutherford PTA Reimbursement Request

Date Submitted _____

Name _____

E-mail _____ Phone _____

List Expenditures by store (i.e. each line should match an attached receipt):

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL Reimbursement Amount \$ _____

What were the funds used for (summarize items purchased, e.g. party supplies for graduation): _____

Spending was approved via

_____ House funds allocation

_____ Grant request (grant id# _____)

_____ PTA event/program expense

Event/Program: _____

Submit completed form & all receipts/documentation to the PTA Treasurer's box in the school office. Reimbursement Forms are due on the 2nd & 4th Friday of each month; Checks will be distributed on the following Wednesday. Please check reimbursement calendar in office for details.

For Treasurer's Use Only

Check # _____ Dated _____ Logged _____