

Request For Reimbursement/Payment Authorization

Grand Ridge PTSA 2.6.10

INSTRUCTIONS: Please complete all un-shaded portions of form. Attach original invoices, receipts, or billing statements. (Please always have reimbursable items on separate receipts from personal items.) Remember to include sales tax on reimbursable items. Place completed form and supporting documents in the PTSA Treasurer's file. Incomplete forms and those lacking necessary documentation will be returned. If you need assistance or have questions, please contact the PTSA Treasurer, grptsatreasurer@gmail.com.

Section I – Expenditure information *(To Be Completed by Person Requesting Payment)*

A. Detail of Expenditure(s)

1. Description of item(s) purchased: _____

2. Program/event for which expenditures were made: _____
3. Total amount expended (attach all invoices): _____

B. Payee

Payee name: _____
Email: _____ Phone Number: _____

C. Method of Payment

- Check left at school in RC file
- Check mailed (attach self-addressed, stamped envelope)
- Pay attached bill

Special Instructions:

D. Signature of person requesting payment:

_____ Date: _____

Section II – Approvals *(Two signatures required. Payee may not approve own expense.)*

Chair/Director (if Chair is payee): _____ Date: _____

**Budget Line Item: _____ **

Director: _____ Date: _____

Checks void after 90 days. Please cash promptly.

PTSA Treasurer's Use Only

Check Number: _____ Check Date: _____

Check Amount: _____