

Prairie PTA

Check Request/Reimbursement Form

Instructions: Please fill out this form completely and staple receipts to the back of this form. No reimbursement will be made without a receipt. Put this completed form in the Treasurer's folder in the PTA box or mail to Kelly Henderson 4415 W 70th Street, Prairie Village, KS 66208.

Committee: _____ Today's Date: _____
 Committee Chairman: _____ Phone #: _____
 Event/Purpose: _____
 Submitted by: _____ Signature: _____
 Committee Chair Signature: _____
 Budget Category: _____

(Reimbursement request form must be signed by submitter and committee chair)

Receipt(s) must be attached to this sheet!

List item(s) purchased or services received: _____

Make check payable to: _____ in the amount of \$ _____

Check here to have your check left in your committee's box in the PTA cabinet OR please mail to the following address:

 Name _____
 Address _____
 City,State,Zip _____

FOR TREASURER'S USE ONLY:

Check Number: _____ Date Paid: _____ Amount: _____ Category: _____

Questions? Contact Kelly Henderson 913.269.4452 or kelly.g.henderson@gmail.com

BUDGET CATEGORY		AMOUNT
TOTAL		