

Expense Reimbursement Form – 2020-2021

Highlands Elementary School – PTA

(Please Use a Separate Form for Each Check Requested)

Committee/Event	
Purpose of Expense:	

Provide/Mail Check to:

Name:					
Address:					
City:		State:		Zip Code:	

Make Check Payable To:				
Amount of Check Request:	\$	Receipt Attached:	Yes	No

If receipt is not available, please itemize below and indicate why receipt is not available:

Item(s) Purchased:	Amount		
Total of Items:	\$		
Comments:			
Submitted By:		Date:	
Signature:			

Please put the completed form in a sealed envelope addressed to Linda Hauner (PTA Treasurer) in the PTA mailbox in the school office, or send electronic copy to PTA Treasurer Mailbox: HighlandsPTATreasurer@gmail.com. Include scan of all receipts.

For Treasurer's Use Only:

Amount Paid:		Date Paid:		Check Number:	
Treasurer's Signature:					