

Kealing PTA REIMBURSEMENT FORM

Return to treasurer red folder in PTA mailbox in the teacher workroom or email to treasurer@kealingpta.org

Name: _____

Email Address: _____

Pick Up Check in Teacher Workroom Yes No

or Mailing Address _____

Telephone Number: _____

Date of request: _____

Date check needed: _____

Make check payable to: _____

Account to be debited: _____

* if you don't know what account to charge, describe what the purchase is for.

If your invoice reflects more than one account, please identify each and the amount that should be deducted from each. Remember to use the sales tax exemption certificate when purchasing items for PTA use.
SALES TAX WILL NOT BE REIMBURSED.

Item	Place of Purchase	Amount

Total \$ _____

Remarks: _____

Treasurer's Notes:

Invoice Received: _____

Date Paid: _____

Check Number: _____

Amount: _____

Category: _____

Attach Receipt(s)