

Jason Lee PTA Reimbursement/Payment Request

Please complete the appropriate sections below. For reimbursements, attach supporting documents (receipts, invoices, or bills) to the ***back*** of this form. Supporting documentation for advanced payments must be submitted promptly following expenditure of the funds.

Requestor's Name: _____ Date: _____ Phone: _____

This Request is For: Reimbursement Advanced Payment

Total Requested: \$ _____ Check payable to: _____

	Event or Exp Category	Amount	Description/Purpose of Expenditure
1			
2			
3			
4			
	Total		<i>← Must match Total Reimbursement amount above</i>

Expedited Processing? Yes No If Yes, Date Check Needed: _____

Signature: _____
I certify that payment requested is for legitimate Jason Lee PTA expenditures

Additional Explanation/Special Instructions:

Do not write below this line – Treasurer Use Only



Check Number: _____ Date Issued: _____ Treasurer Initials: _____