

Erin School PTC

## Reimbursement Request/Check Request

This form should be submitted if 1) you need to be reimbursed for a PTC expense you personally incurred or 2) to request a check payment to be made to a vendor.

**\*\* Receipts or invoices must be attached\*\***

<b>Request Date:</b>	<b>Amount: \$</b>
<b>Check Payable to:</b>	
<b>Event Name:</b>	

**Do you need original receipt back (yes/no)?**

**Payment Requested by**

**Name:**

**Email:**

Notes:

\* Please underline the purchase you want to be reimbursed for on the receipt if it's mixed with non-PTC purchases

\* Please put completed forms in orange folder in PTC mailbox in teacher's lounge or hand it to Treasurer

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**FOR TREASURER USE ONLY:**

<b>Date Paid</b>	<b>Check #</b>	<b>Check Amount</b>