

WASHINGTON IRVING ELEMENTARY SCHOOL PTO

REQUEST FOR CHECK REIMBURSEMENT

Please complete the top portion of this form, sign it and attach receipt, invoice or other documentation of expenses before submitting it to the PTO Treasurer by:

- 1) Placing form and documentation in an envelope in PTO Box in the Irving School office or
- 2) Emailing form and documentation to PTO Treasurer Eduardo De Santiago at abilalo@sbcglobal.net.

Please contact Eduardo by email with any questions.

Date:	
Requested By (Name):	
Purpose Of Reimbursement: (Specify the purpose of the reimbursement and provide relevant details of the project/event)	
Reimbursement Details: (Itemize expenses to be reimbursed and attach supporting documentation (e.g., receipts))	
<u>Budget Item/Category:</u>	<u>Amount:</u>
TOTAL REIMBURSEMENT:	
Handling Instructions: (Specify the individual/company that is being reimbursed, where the check should be mailed/delivered, and date needed)	
Payee Name (Issue check to)	
Address	
City, State, Zip	
Phone	
Date Reimbursement Needed	
Notes/Special Considerations	
Signature of Requestor (Required)	
Committee Chair Approval (if needed)	
Treasurer Approval (initials)	
Check Number/Date	

NOTE: Turn in receipts no later than 30 days after date of receipt. All receipts will be paid within 5 business days.