MEAD PTSA CHECK REQUEST and/or REIMBURSEMENT VOUCHER

Please Remember:

Attach ALL receipts, and copy of Grant request if applicable
 (Reimbursements will not be issued without a receipt)

Itemize all receipts or purchase orders
 Total reimbursement request amount

ILL OUT THE FOLLOV							
Event/Activity:			Please I	Deliver My Chec	k Via (checks of	annot be sent hom	ne with students):
Budget: Grant	ant □ PTSA Budget Line Item			□ Placed in Committee Folder			
Date of Request:		☐ Placed in attached self addressed/stamped envelope (parents)					
Pay to the order of:	□ Place	☐ Placed in teacher's box (School Staff Only)					
Signature:	Other	Other:					
TSA President Signatu	ro:						
	re:						
Receipt Date	Vendor/Business	It	tem(s) Purchased		Tax	Shipping	Total
	Treasurer's Use	e Only:		TOTAL REI	MBURSEME	NT AMOUNT	\$
	Treasurer's Use	•		TOTAL REI	MBURSEME	NT AMOUNT	\$
Check Number:	Entered in financi	•	mount:	TOTAL REI	MBURSEME	NT AMOUNT	\$