



Washington Elementary PTA

Reimbursement Request

Fill out the form below completely. All receipts should be attached to the form and emailed to wahoyttreasurer@gmail.com or submitted in Treasurer file in copy room.
(Please allow up to two weeks for reimbursements to be processed)

Date _____

Submitted by _____

Phone _____

Email _____

Check Amount _____

Unless otherwise indicated, checks will be placed in the file labeled 'PAID REIMBURSEMENTS' located in the copy room.

Please Mail Please leave in my staff box in the copy room

Send Check to (name) _____

Address _____

City/State/Zip _____

Description of Purchase	Amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total	_____

*Please include all receipts. Per IRS regulations, reimbursements without receipts cannot be processed.

