

# **EASTOVER PTA**

## **Check Requisition and Reimbursement Request**

Please submit to the PTA treasurer with support documentation (receipts or invoices).

*PLEASE PRINT:*

**Pay to:** \_\_\_\_\_

**Amount:** \_\_\_\_\_

**Purpose of expenditure:**  
\_\_\_\_\_

**Invoice #:** \_\_\_\_\_

**Date invoice due:** \_\_\_\_\_

**Please charge the following account for this expense:**  
\_\_\_\_\_

**Requested by:** \_\_\_\_\_

**Committee:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Routing directions:**

- Leave for me in the office or in my PTA box.
- Mail to \_\_\_\_\_ at this address (include phone number):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Seed Money:**

Name: \_\_\_\_\_ Amount: \_\_\_\_\_ Signature: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_