

**Herndon Middle School PTA
Request for Reimbursement
2016 – 2017**

Date: _____

Make check payable to: _____

For how much: \$ _____

For what specific items: _____

Budget category to be charged: _____

**Please attach invoice or receipts.
Mail completed form with receipts to:**

**HMS PTA Treasurer
c/o Herndon Middle School
901 Locust Street
Herndon, VA 20170**

Signature of Committee Chair, Team Leader or PTA Officer:

* * * * *

For Treasurer's use:

Paid date: _____ Check #: _____ Posted: _____