

FWES PTA Expense Reimbursement Form

Please complete this form when requesting reimbursement from the PTA for any expenses incurred on behalf of PTA. **Attach all required receipts to the back of this form** and forward to the PTA Treasurer as soon as possible. If you used a credit card, the PTA is not responsible for interest should you fail to turn in your receipt in a timely manner. Committee bills over and above the budgeted amount must have approval from the Executive Board (and cannot be paid until the association votes to approve the overage). **No reimbursement will be made without receipts.**

Name _____ Phone # _____

Address _____ Zip Code _____

Expense OR Committee being reimbursed: _____

Total Amount of Expense for reimbursement: _____

Comments or special instructions:

Signature: _____ Date: _____

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For Treasurer use only:

Check Payable to: _____

Date Received by Treasurer: _____

Date Check Issued: _____

Check No.: _____

Please attach all receipts to this form and submit to the FWES PTA treasurer.