

Wallace Elementary School PTO

Expense Reimbursement Form

Complete this form with a copy of your receipt(s). Please email it to Morgan Halverson at morganmariah@gmail.com or leave it in the PTO mailbox. Please let me know if it is in the mailbox. Keep a copy for your records. Thank you.

Date:_____

Submitted by (name): _____ Phone: _____

Committee: _____

Brief explanation of expense:_____

Amount of check: _____ Date needed: _____

Payable to: _____

Address to be mailed: _____

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For Treasurer Use Only:

Date: _____ Check # _____ Amount: _____

