

RECEIPT SUBMITTAL FORM

DATE	EXPENSE TOTAL
NAME	PHONE NUMBER

Receipts are required for all PTA expenditures. All reimbursement requests must be tied to a line in the approved Bridger PTA budget. Please staple receipts to this form and place in the PTA mailbox.

Are you requesting a reimbursement check? Yes No

This purchase was authorized through (please see PTA budget):

- | | |
|---|---|
| <input type="checkbox"/> After School Club | <input type="checkbox"/> Student Council |
| <input type="checkbox"/> Educational Grants * | <input type="checkbox"/> Professional Development * |
| <input type="checkbox"/> Field Trips | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Librarian's Fund | |

* Prior PTA board approval required.

EXPENSE DESCRIPTION

Requestor's Signature _____

Place reimbursement check in:

- Bridger School Mailbox
 Please mail to: (please include a self-addressed stamped envelope)

FOR PTA TREASURER ONLY			
DATE	CHECK#	FOR \$	BY