

Country Club Elementary PTA



Request for Reimbursement/Payment Authorization

(Receipts/invoices must be attached to all requests)

Payable To: _____

Total Amount
\$ _____

Deliver Check to Requestor OR Mail to Address Below

Address: _____

Date	Budget Category	Explanation	Amount
		Total	

Notes

Requested By: _____

Required Signatures:

President _____

Recording Secretary _____

Treasurer's Use Only
Check # _____
Date paid _____
Initials _____