



For Treasurer's Use

Check# _____

Date Paid: _____

EVERETT HIGH PTA 7.3.85
REIMBURSEMENT / PAYMENT REQUEST FORM

Committee: _____

Amount of Purchase/Request: \$ _____

Line Item in Budget: _____

Description of Expense: _____

Make Check Payable To: _____

Phone Number: _____

Address (if needs sending) _____

Attach invoices or receipts (REQUIRED FOR PAYMENT)

Requested by: _____

Date Requested: _____

This form enables the Treasurer to pay expenses correctly and is a record of our expenditures.

It protects all of us and must be completed for all payment requests.