**Barnsley PTA Reimbursement Request Form**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date Submitted:** | |  | | |  | | |
| **Requested by:** |  | | | |  | **Phone Number:** |  |
| **Event/Committee\*:** | | |  | | | | |
|  | | | | | | | |
| *\*Event/committee must be specifically identified in the PTA’s approved budget.* | | | | | | | |
| **Description of Expenditure:** | | | |  | | | |
|  | | | | | | | |

|  |  |
| --- | --- |
|  | Receipt Attached |
|  | |
|  | No Receipt available. Requestor certifies that the expenditures were made on behalf of the Barnsley PTA and are true and correct. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Amount Requested:** |  | | |  |
| **Make Check Payable to:** | |  | | |
| **Return to (address/hand deliver):** | | |  | |

|  |
| --- |
|  |

**For Treasurer’s Use Only**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date Received:** | | | | |  | |  | | | |
|  | Request approved as presented. | | | | | | | | | |
|  | Request not approved as presented. | | | | | | | | | |
| **Description:** | | |  | | | | | | | |
| **Adjustment:** | | |  | | | | | | | |
| **Check Number:** | | | | |  | |  | **Check Amount:** |  | |
| **Issued to:** | |  | | | | | | | | |
| **Returned via:** | | | |  | | | | | | |
| **Date Issued:** | | | |  | |  | **Date entered in computer:** | | |  |