

## EMS PTSA Reimbursement Procedures

### 21-22' School Year

- (1) Complete the reimbursement form. Please select appropriate item to you, and fill in the address that you would prefer to receive the check from.
- (2) If applicable, have your Committee Chairperson sign your reimbursement form.
- (3) Send your receipts or invoices with the completed reimbursement form **digitally**, and related documents (if so) to [treasurer@evergreenpts.org](mailto:treasurer@evergreenpts.org).



# Evergreen Middle School PTSA Reimbursement/Payment Request

Please attach receipts or invoices to this form. This will enable the treasurer to keep accurate records of amounts spent in each budget category.

Date:	
Committee/Office:	
Name:	
Phone:	
Email:	
Amount:	
Make Check Payable to:	
I prefer to receive the check:	<div><input type="checkbox"/> Leave check in my staff mailbox</div> <div><input type="checkbox"/> Mail check to business at the following address: _____</div> <div><input type="checkbox"/> Mail check to me at the following address: _____</div>
Explanation of Expenditure:	
Budget Category:	

Signature of Person Submitting: \_\_\_\_\_

Signature of Committee Chairperson: \_\_\_\_\_

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## **For Treasurer Use Only**

Check Number: \_\_\_\_\_

Check Date: \_\_\_\_\_

Check Amount:	
Budget Category Charged:	
Treasurer Signature:	