Central Valley PTA

Reimbursement

- o Complete this form when requesting reimbursement for expenses incurred on behalf of the PTA
- o Attach all required receipts to this form and forward to the PTA treasurer within 15 days of the purchase or event
- o A copy should also be placed in your committee binder
- o If you used a credit card the PTA is not responsible for any interest
- o Committee bills over the budgeted amount by \$20 must have approval from the Executive Board and cannot be paid until the association votes to approve the overage
- o No reimbursements will be made without a receipt

Name		Phone	
Expense of Committee b	peing reimbursed		
Total amount of expense	e for reimbursement .		
Comments of special ins	tructions		
Check Payable to			
		Date	
••••••		urer Use Only:	••••••
Date received by Treasu	rer		
Date Check Issued	Check No	Date Check Cleared	
Approved by			

Please attach receipts or copy of receipts and submit to PTA treasurer:

Gabriella Karl

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