



# PARENT REQUEST FOR PAYMENT OR REIMBURSEMENT THROUGH PTA

**REIMBURSEMENT REQUEST PROCESS:**

1. Complete the information below, including signature
2. Place completed form along with original invoices or receipts in the Treasurer's Box (located in the school office)

**NOTES:**

- Completed requests placed in the Treasurer's Box on or before the 1<sup>ST</sup> of the month will be available for collection from the "check collection" folder on the 15<sup>TH</sup> of the month.
- Completed requests placed in the Treasurer's Box on or before the 15<sup>TH</sup> of the month will be available for collection from the "check collection" folder on the 1<sup>ST</sup> of the next month.
- All requests must be accompanied by original invoices or receipts and approved by the PTA Treasurer. Please make sure that all requests are within budget. Feel free to check with the Treasurer for an updated balance on any budget / sub category. If your requests exceeds the approved budget or is not budgeted, approval from the Association / President is required. Please contact the treasurer at [treasurer@pcypta.org](mailto:treasurer@pcypta.org) if you have any questions.

<b>Today's Date:</b> _____	<b>Signature:</b> _____
<b>Person Submitting Request:</b> _____	<b>Check Payable To:</b> _____
<b>Contact Number:</b> _____	<b>email:</b> _____
<b>Address:</b> _____	

All expenses must be submitted for reimbursement no later than two (2) weeks after the event they relate to.

Description of Expense	Amount	Event Name / Description

**TOTAL AMOUNT REQUESTED \$ \_\_\_\_\_**

\* If expense exceeds \$500.00, please provide a brief summary of the purpose for the expense (in space below) ...

**Budget Expense Category - please specify**

_____ Administrative	_____ Fundraising	_____ Restricted Funds
_____ Council	_____ Hospitality	_____ School
_____ Enrichment	_____ Program	
Unallocated Reserves (date approved _____)		Emergency Reserves (date approved _____)

**Budget Expense Sub-Category:**

Please refer to the copy of the budget in the PTA website or ask your Chairperson

Current Budget Remaining (Per Code):  
\$ \_\_\_\_\_

<b>APPROVED BY:</b>		
PCY PTA Treasurer (required): <i>Mira Shah</i>	PCY PTA President (required): <i>Holly Breckheimer</i>	PCY PTA Recording Secretary (required): <i>Diana Crain</i>