

Wedgwood PTA

Request for Reimbursement

Date of request: _____

Requested by: _____

Phone number or e-mail: _____

Total amount requested: \$_____

Purpose of Request: _____

Please complete the following items:

- Check should be made out to: _____
- Address (if check should be mailed):

- Documentation (attach receipts and written clarification of items purchased if not obvious from receipts:

Thank you,

Wedgwood PTA Co-Treasurer

NOTE: No reimbursement can be made without receipts

For Treasurer's Use:	
Date of Check: _____	
Check Number: _____	Check Amount: _____
Budget Line Item: _____	