

**Triadelphia Ridge Elementary School PTA
Reimbursement Request Form**

(Please fill out and attach all receipts/invoices)

To the PTA Treasurer:

Date: _____

Requested by: _____
(Signature)

Pay to the order of: _____

Amount: _____

Purpose: _____

List of itemized expenses (if applicable): _____

Total number of receipts attached: _____

Instructions for check:

____ Leave in TRES Staff mailbox

____ Mail to the following address:

____ Other _____

PTA Fund to be charged: _____

Paid by check number: _____ Date: _____

Disbursed by: _____
(PTA Treasurer's signature)