

Staple Receipt to back here

MAURICE HAWK PTA Request for Reimbursement or Payment

Date: _____

Name of Person making request: _____

Payee (if different from above): _____

Committee: _____

Amount requested: _____

Item(s) purchased: _____

This completed form with all receipts attached should be placed in the Treasurer's folder located in the school's front office.

Please submit requests for funds within 15 days of purchase of items. No expense payment will be made after June 15th for school year.

***NOTES:**

1. An Executive Committee Member must first approve any single expenditure over \$50.
2. Any amount over \$250 requires two signatures on the payment check.
3. Sales tax from personal purchases on behalf of the Hawk PTA will not be reimbursed. Please remember to use the Tax Exemption form when making purchases.

Please check one of the following:

Place check in committee folder in PTA Drawer.

I will pick up check from the Treasurer – Please call _____ when ready.

Mail check to supplier. Address: _____

For Treasurer Use Only

Date Paid: _____

Amount Paid: _____

Entered Computer Register: _____

Check Number: _____