

B.B. Harris PTA Reimbursement Form

Date of request: _____

Person requesting _____

Make check payable to _____

Check Amount \$ _____

Purpose of Check _____

Address: _____

Classroom Teacher: _____

of Students (class parties only) _____

Signature of Requester: _____

TREASURER'S USE ONLY

PTA Approval _____ Date _____

Budget item _____

Check Number _____

Treasurer's Signature: _____