



SAUDER ELEMENTARY PTG | Reimbursement Request

YOUR NAME:	PHONE:
EVENT:	DATE SUBMITTED:
SPECIFIC PURPOSE FOR PURCHASES:	
PLEASE INDICATE HOW YOU WOULD LIKE TO RECEIVE YOUR REIMBURSEMENT:	
<input type="checkbox"/> Leave Check in School Office	
<input type="checkbox"/> Mail Check (Address: _____)	
<input type="checkbox"/> Send Check Home (Student & Teacher: _____)	
<input type="checkbox"/> PayPal (Email: _____)	

Complete the following for your reimbursement:

- ✓ **ALL REIMBURSEMENT REQUESTS ARE DUE WITHIN 14 DAYS OF EVENT!**
- ✓ Complete this form and place it in an envelope labeled "Reimbursement" in the locked purple PTG Box
- ✓ **Receipts/Invoices totaling the reimbursement amount must be attached to this form.**
- ✓ Please note that tax is *unable* to be reimbursed — Blanket Tax-Exempt forms and a list of Tax-Exempt Vendors are located in the PTG cabinet in the office for use prior to purchases.
- ✓ Contact the PTG Treasurer with any questions regarding reimbursement: **SAUDERPTG@GMAIL.COM**

VENDOR	AMOUNT
	\$
	\$
	\$
	\$
	\$
TOTAL REIMBURSEMENT AMOUNT:	\$

SIGNATURE OF PURCHASER:	DATE:
APPROVED BY 3 PTG OFFICERS (REQUIRED IF AMOUNT EXCEEDS \$500):	DATE:

FOR TREASURER'S USE ONLY

Category: _____ Date: _____

Check Number: _____ Logged: _____