

REIMBURSEMENT FORM

For reimbursement of expenses covered by GFS/JWL PTO.

Please fill out this form, include appropriate documentation (copies of receipts, etc.) by attaching to the back of this form. Photocopy your records prior to submitting to Treasurer. Completed form should be placed in the GFS/JWL PTO box.

Date of submission: _____ **Activity/Event:** _____

Teacher/Chairperson(s): _____

Phone number: _____ **# of Receipts Attached:** _____

Check payable to: _____

E-mail address for notification when check is ready:

Explanation of Expenses

PTO Treasurer's Use Only. Check date _____ Check # _____