

OAK PTA

# REIMBURSEMENT FORM

PLEASE ATTACH  
RECEIPTS TO  
BACK SIDE OF  
THIS CORNER.

DATE: \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

COMMITTEE: \_\_\_\_\_

CHECK PAYABLE TO: \_\_\_\_\_

ITEM(S)/PURPOSE(S)

1.	_____	\$ _____
2.	_____	\$ _____
3.	_____	\$ _____
4.	_____	\$ _____
5.	_____	\$ _____
6.	_____	\$ _____
7.	_____	\$ _____

**TOTAL AMOUNT** \$ \_\_\_\_\_

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**FOR PTA TREASURER'S USE ONLY – Please do not write below this line.**

DATE PAID: \_\_\_\_\_

CHECK NUMBER: \_\_\_\_\_

BUDGET ITEM: \_\_\_\_\_

NOTES: