



Phelps Luck Elementary  
**PTA**<sup>®</sup>  
*everychild.onevoice.®*

## DISBURSEMENT/ REIMBURSEMENT FORM

Please complete form and attach receipts to support payment request. Please circle/highlight amounts being reimbursed on the receipts. (Please use the "Classroom Reimbursement Form" for teacher/staff classroom reimbursements.)

Make Check Payable To: \_\_\_\_\_

Requested By: \_\_\_\_\_ Date: \_\_\_\_\_

Purpose: \_\_\_\_\_

Approved By (PTA officer): \_\_\_\_\_ Title: \_\_\_\_\_

### Itemized Expenses continued on reverse):

Item Description:	Amount:
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**Total Amount Requested: \$ \_\_\_\_\_**

#### \*\*Treasurer's Use Only\*\*

Budget Line Item: _____	Amount: \$ _____
Budget Line Item: _____	Amount: \$ _____
Budget Line Item: _____	Amount: \$ _____

Approved Expense:  Yes  No | Advance:  Yes  No (If yes, Advance Form attached?:  Yes  No)

Membership Dues: \$ \_\_\_\_\_ # of Memberships: \_\_\_\_\_ Date Sent to MDPTA: \_\_\_\_\_

**Check Total (amount allowed): \$ \_\_\_\_\_**

Check #: \_\_\_\_\_ Date Issued: \_\_\_\_\_  Data entered

Check #: \_\_\_\_\_ Date Re-issued: \_\_\_\_\_  Data entered

Date Reconciled: \_\_\_\_\_  Data entered

Treasurer: \_\_\_\_\_ Date: \_\_\_\_\_

Received By: \_\_\_\_\_ Date: \_\_\_\_\_