REIMBURSEMENT & CHECK REQUEST VOUCHER SEAFORD ELEMENTARY SCHOOL PTA INC

1. To Whom is the	he check to be written:	TREASURER TO COMPLETE	
Name:		Check #:	
Address:		Date: Amount: \$	
2. Purpose money was spent for:		Entered in MoneyMinder: 🖵	
3. Date the check needed by and date form submitted:			
Need by:			
Submitted:			
4. Contact details of person submitting this form:			
Name:			
Phone:			
Email:			
Signature:			
5. If form is submitted by Committee Chairperson, it must be approved by an Executive Officer:			
Approved By:			
6. Please indicate the budget which is to be charged:			
□5 th Grade Celebration		□Parent+Child Dance	
Administrative Expense		Penguine Patch Holiday Shoppe	
		Performing Arts	
□Art Enhancements		Physical Education Enhancements	
		Reading Enhancements Book Coupons	
		Literacy Room Enhancements	
Box Tops		Reflections Program	
Bulldog Magnets			
		Snack Field Day	
Clay + Glaze Enhancements		□Spirit Wear	
□Fall Festival		State and National PTA Dues	
Honor Roll		Student Directory	
□Hospitality		Science Fair	
Instructional Principal Enhancements		□Talent Show	
		Teacher + Educator Instructional Allotments	
Library + Media Specialist Enhancements		Technology + Computer Enhancement	
Material Prep+Laminating Film		❑Walk-A-Thon	
Membership Campaign		❑Other:	
Mini Grant Enhancement			

□Music Enhancements

7. Attach receipts to back of form:			
8. Please deliver to the PTA Treasurer via the PTA Treasurer's folder in the Teacher's Resource Room.			
9. Total of Reimbursement:			