

STAFF REQUEST FOR PAYMENT OR REIMBURSEMENT THROUGH PTA



Today's Date: _____ Total Amount Requested*: _____

Person Submitting Request: _____

Phone Number: _____ e-mail Address: _____

ENRICHMENT CATEGORY

- | | | |
|---|--|---|
| <input type="checkbox"/> Art | <input type="checkbox"/> Computer Lab | <input type="checkbox"/> Reading Enrichment |
| <input type="checkbox"/> Assemblies | <input type="checkbox"/> Drama | <input type="checkbox"/> RSP |
| <input type="checkbox"/> Character Curriculum | <input type="checkbox"/> Extra Duty / Extra Pay | <input type="checkbox"/> Science Materials |
| <input type="checkbox"/> Classroom / Teacher | <input type="checkbox"/> Field Trip Grants | <input type="checkbox"/> Staff Development |
| <input type="checkbox"/> Classroom / Equipment | <input type="checkbox"/> Library | <input type="checkbox"/> Supplies (Office) |
| <input type="checkbox"/> Classroom / Playground | <input type="checkbox"/> Library (Acc. Reader) Music | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Supplies | | |

RESTRICTED FUNDS:

- Library
 Library (Acc. Reader)

PROGRAM FUNDS:

- Chorus

OTHER:

Who should the check be made out to?

Address: _____

Phone: _____

Check Delivery Instruction: Mail Other: _____

EXPENSES WILL BE REIMBURSED WITHIN TWO (2) WEEKS. PLEASE ATTACH INVOICES OR RECEIPTS.

Please note ... all expenses must be accompanied by original invoices or receipts and approved by Principal Hetzel. Please contact the PTA Treasurer at treasurer@pcypta.org if you have any questions. PTA has final approval on all reimbursements.

Current Teacher Budget: \$ _____

APPROVED BY:

PCY Principal – Ms. Carrie Hetzel (required): _____

PCY PTA Treasurer – Mira Shah (required): _____

PCY PTA Recording Sec. – Diana Crain (required): _____

PCY PTA President – Holly Breckheimer (required): _____

* If expense exceeds \$500, please provide a brief summary of purpose of expense below.

