VENDOR EXPENSE REQUEST OR REIMBURSEMENT THROUGH PTA

PARADISE CANYON ELEMENTARY
PTA
471 Knight Way
La Canada, CA 91011
818.952.8340 (office)
818.952.8337 (fax)
818.949.4881 (absence hotline)

EXPENSE REQUEST PROCESS:

1. Complete the information below, including signature
2. Place completed form along with original invoices or receipts in the Treasurer's Box (located in the school office)

NOTES:

▪ Completed requests placed in the Treasurer's Box on or before the 1ST of the month will be available for collection from the "check collection" folder on the 15TH of the month.

▪ Completed requests placed in the Treasurer's Box on or before the 15TH of the month will be available for collection from the "check collection" folder on the 1ST of the next month.

▪ All requests must be accompanied by original invoices or receipts and approved by the PTA Treasurer. Please make sure that all requests are within budget. Feel free to check with the Treasurer for an updated balance on any budget / sub category. If your requests exceeds the approved budget or is not budgeted, approval from the Association / President is required. Please contact the treasurer at treasurer@pcypta.org if you have any questions.

Today's Date: **Treasurer Signature:**

Check Payable To:

Contact Number: **email:**

Address:

All expenses must be submitted for reimbursement no later than two (2) weeks after the event they relate to.

Vendor Name	Amount	Description of Expense

TOTAL AMOUNT REQUESTED $_____

* If expense exceeds $500.00, please provide a brief summary of the purpose for the expense (in space below) …

Budget Expense Category - please specify

_____ Administrative	_____Fundraising	_____Restricted Funds
_____ Council	_____Hospitality	_____School
_____ Enrichment	_____Program	_____LCUSD District Gift

Unallocated Reserves (date approved_____) Emergency Reserves (date approved_____)

APPROVED BY:

PCY PTATreasurer (required):	PCY PTA President(required):	Recording Secretary (required):
Mira Shah	*Holly Breckheimer*	*Diana Crain*