



# WOODROW WILSON PTO Reimbursement Form

Name \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Amount of Total Reimbursement \_\_\_\_\_

Purpose (example)	Purchase (Where and What)	Amount
<i>Carnival</i>	<i>Wal-Mart Decorations</i>	<i>\$15.00</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Notes/Comments/Questions: \_\_\_\_\_

\_\_\_\_\_

\*\*\* Please attach receipt(s) or copy(ies) of receipt(s) to the back of this form! \*\*\*

PTO Treasurer's Use Only		
Paid with Check Number _____	Date _____	Initials _____