



# Hillside School PTO

## Reimbursement Request Form

Treasurer: Whitney Mickno (wmickno@yahoo.com, 276-768-7252)

Please attach your original receipts and/ or invoices and submit to treasurer **within 30 days** of incurring the expense.

Requested by: \_\_\_\_\_ Date requested: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Amount requested: \$ \_\_\_\_\_

Make check payable to: \_\_\_\_\_

Name of event/activity/fundraiser: \_\_\_\_\_

Reason/ purpose for check: \_\_\_\_\_

Method of return:

- I will pick up at the next PTO meeting
- Send check directly to vendor/business (Address us above in the 'make check payable to' section)
- Please send it home with my child: \_\_\_\_\_  
Child's name, teacher & grade
- Please mail it to my home: \_\_\_\_\_  
Full mailing address

-----

FOR USE BY TREASURER

Date paid: \_\_\_\_\_ Check #: \_\_\_\_\_

Notes: \_\_\_\_\_