

PINE-RICHLAND HANCE PTO
Committee Reimbursement Form
2022-2023 Fiscal Year

Date: _____
Committee: _____
Name: _____
Email: _____
Phone: _____

Reimbursement Check:

Pick up at next event

Other (please indicate below)

Mail to: _____

Procedures:

Attach the original detailed receipt for each purchase to the back of this form or to another sheet of paper, OR scan with the form.

Circle or highlight the amounts on each receipt requested for reimbursement.

Place this completed form and receipts in an envelope addressed to the Hance PTO Treasurer and place in PTO Mailbox or email form and receipts to hancetreasurerpto@gmail.com

Please copy your reimbursement request and receipts for your own records.

Committee members must submit their reimbursement request within 30 days of conclusion of the committee event.

Date of Purchase	Description (Vendor + Item Desc./Purpose of Expense)	Total Amount
Total Due:		

Questions? _____
 email: hancetreasurerpto@gmail.com

Treasurer: Beth Klebacha