

Vashon Island Community PTSA

Check/Reimbursement Request Form

Instructions: • Complete form & submit with documentation to Treasurer:
 • Requests processed when form & documentation complete

Manette Arteaga
 Email: Treasurer@VashonPTSA.org

Your Name: _____ **Date:** _____
name printed signature

Purpose of Check: Reimbursement - Attach proof of payment (cash register receipt etc) to this form.
 Invoice Payment - Attach invoice to this form

Make check payable to: _____

Check Instructions: Mail Check to: _____ Payee phone # _____
street address city, state, zip

- Leave Check at CES/PTSA mailbox
- Will pick up from Treasurer

Description of Expenses:	1	2	3	4	5	Amount
	_____	_____	_____	_____	_____	\$ _____
	_____	_____	_____	_____	_____	\$ _____
	_____	_____	_____	_____	_____	\$ _____
	_____	_____	_____	_____	_____	\$ _____
	_____	_____	_____	_____	_____	\$ _____
	Total Requested:					\$ _____

Budget/Expense Category - Indicate the amount in each box (total must equal above "Total Requested")

CES Orca Readers	CES Staff Appreciation	CES Family Fun Night	CES Book Fair	CES Popcorn Fridays	Back to School Drive
McM Rec Night	McM Staff Appreciation	McM Teen Forum	McM Book Fair	McM/CES Science Fair	Robotics
VHS Teen Forum	VHS Staff Appreciaton	Membership	Administrative	Legislation	Communications
VHS Debate club	Doors of Opportunity	VISD	Auction	Other(specify):	

For Treasurer's Use Only:

Budget: Original approved budget
 General membership mtg approval
 Board of Directors mtg approval

Date Request Received: ____/____/____
 Date Check Issued: ____/____/____
 Check #: _____

Treasurer's Signature: _____

Second Signature Review: _____
name printed date

Important Note: Check **CANNOT** be requested, approved, and signed by and issued to the same person