

PPS PTO Expense Reimbursement Request

- Please complete one form, per person, per event.
- Please attach all receipts/proof of payment to this form or place in an envelope.
- Please keep a copy of this form and all receipts before submitting original.
- Upon completion, please place in the "Reimbursement Request" folder in the PTO Mailbox, located in the school office.
- Please contact Kristy Perry with any questions pertaining to the reimbursement: 881-2066 or kristy.perry@ge.com.

Name _____	Amount _____
Date _____	Purpose/Event _____

Please provide address for reimbursement to be mailed	PTO USE ONLY
	Check #
	Date:
	Amount:

Attach receipts below