



REIMBURSEMENT/PAYMENT FORM

Send completed form with receipts to treasurer@redmondhsptsa.org
Or mail to RHS PTSA, 17272 NE 104th St, Redmond, WA 98052

Amount: \$ _____ Date: _____

Budget Line: _____

Explanation of Expenditure: _____

Submitted by (print name): _____

Committee/Position: _____

Phone/Email: _____

Reimbursement Method Requested: Check PayPal

Make check payable to: _____

Address where check should be mailed or email for PayPal reimbursement: _____

Expense approved by (print name & title): _____

Approval Signature: _____

- *Expenses require approval by a committee chair or board member.*
- *PayPal reimbursement requires approval by a bank signer.*
- *Receipts/invoice must accompany form to receive payment.*

-----TREASURER USE ONLY-----

Payment Mode: Check # _____ Electronic: EFT PayPal

Amount \$ _____ Payment/Check Date: _____

Budget Category Charged _____

Restricted Fund Expense: yes no Fund: _____

Treasurer Notes: _____

Electronic Payment Second Signer: _____