

Branchburg PTO Reimbursement Form

Directions: Fill out this form completely. Receipts must be attached for each item in order to receive reimbursement. Please note: You must receive approval from the event Chairperson before incurring expenses over \$200.

| Please Print or Type | | | |
|--|---------------|-----------------|-----------|
| Name: | | | |
| Address: | | | |
| City: | | | |
| Phone Number: | | | |
| E-Mail: | | | |
| Select for check delivery: Mail to address above _____ Send home with student (see below) _____ | | | |
| Child's Name & Class Code: | | | |
| Name of Activity: | | | |
| Date of Activity: | | | |
| Description & Itemized Cost of All Materials Purchased: | | | |
| | | | |
| | | | |
| | | | |
| Total Expenses: \$ | | | |
| Signature: | | | |
| Date: | | | |
| Forward completed form including ALL receipts to: | | | |
| Melanie Colasurdo – PTO Treasurer 78 Windy Willow Way Branchburg, NJ 08876 908-458-3302 Melpark11@hotmail.com | | | |
| | | | |
| FOR PTO USE ONLY: | | | |
| Check #: | | Check Amount: | |
| Date: | | | |
| Ledger Code: | Budget entry: | Register entry: | FM entry: |