

Central Elementary

PARENT TEACHER ORGANIZATION

Expense Report

Today's Date:				
This is:				
O A reque	st for reimbursemen	t.		
O A reque	st for payment to a V	Vendor.		
Amount Due: _				
Payment shoul				
O Mailed	to:			
		hild's Name & Homeroo		
Other:				
1		,		
Date of Place of Purchase		Items Purchased		Amount
Please attach s	upporting documen	nts (receipts, invoices,	contracts, etc.) to this form.	
		` •	,	
Submitted By:			Chairperson / Volun (Please Ci	
Signature:			,	icic Olic)
Email:				
Cell Phone Nu	mber:			
Please notify the PTO Treasurer that you are submitting an Expense Report and confirm arrangement for payment. THANK YOU!			To Be Completed By	y PTO
			Treasurer	
			Check #:	
			Date:	