



Fort Belvoir Elementary PTO Reimbursement Request

Name: _____ Phone: (____) _____ - _____
 Address: _____ Email _____

Date Submitted: _____

Reason: _____

Budget Category: Fundraising Volunteers Communications Administrative Support
 Education Support PTO Operations Other _____

Check Payable to: _____

Method to receive reimbursement: Mailed In Person

(Receipts or copies must be attached)

Item	Cost	Item	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total to be Reimbursed \$_____.

Treasurer Use Only

Included in Annual Budget Approved at Meeting (date: _____)

Date Received: _____ Check # _____ Date Logged in Treasurer Records: _____