



REIMBURSEMENT REQUEST FORM

Complete these 3 steps for reimbursement by Solana Beach PTA

within 30 days of incurring your expense:

1. As required by PTA Council policy, scan or photograph your receipt, email, and/or contract to be used as support for your reimbursement.
2. Complete this form AND double check that your document(s) above correctly equals the amount listed below as **amount of expense**. *
3. Email your document(s) + this completed form to solanapta@gmail.com (questions, too).

If you accurately complete the above items, your check will be mailed within 30 days.

THANK YOU FOR YOUR SERVICE!

Today's Date: _____

Your Name: _____

Your Phone #: _____

Your Email: _____

Reimbursement Paid To: _____

Address for Reimbursement: _____

*Amount of Expense: \$ _____

Description of Expense: _____

Associated Budget Line Item (Program Name): _____

School:

Solana Vista

Skyline

PTA-General