

**POHATCONG PTA
EXPENSE REIMBURSEMENT FORM**

DATE: _____

NAME: _____

EVENT/COMMITTEE: _____

COMMITTEE TO BE CHARGED: _____

ITEMS PURCHASED	AMOUNT
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
7. _____	\$ _____
8. _____	\$ _____
9. _____	\$ _____
10. _____	\$ _____
TOTAL AMOUNT PURCHASED	\$ _____

AMOUNT TO BE REIMBURSED BY THE PTA \$ _____

CHECK NUMBER: _____

PRESIDENT

TREASURER