

**VALLEY FORGE MIDDLE SCHOOL PTO
EXPENSE REIMBURSEMENT/CHECK REQUEST FORM**

Please submit expenses as they are incurred. All reimbursement requests must be turned in within 30 days of the event. One person only may submit reimbursement requests per event. Checks will be issued upon completion of this form with all receipts and invoices attached. Place in the PTO box in the office - ATTN: Treasurer. Please retain a copy for your records.

Date: _____

Event/activity: _____

Purpose (i.e., fundraiser, Cultural Arts, etc.): _____

Check payable to: _____

Amount: _____

If check is to be mailed, please indicate mailing address:

Submitted by: _____

Event Chairperson: _____

For Treasurer's Use Only:

Check Number: _____

Check Date: _____