

Sol Feinstone Elementary School PTO Reimbursement/Payment of Expense Form

Submitted By: _____

Address: _____

Telephone: _____

Email: _____

Reimburse To: _____

(please note any special reimbursement instructions)

Date of Expenditure	Description	Dollar Amount	Committee	Account Code (Treasurer)

TO BE COMPLETED BY TREASURER:

Total to be Reimbursed: _____ Check No.: _____

Signature: _____

If you have any questions about completing this form or reimbursement, please contact the PTO Treasurer at sfeptotreasurer1@gmail.com Thank you!!