

Symmес Elementary PTO

Reimbursement/Payment Request



YOUR NAME:	PHONE OR EMAIL ADDRESS:
COMMITTEE OR PROJECT:	DATE SUBMITTED:
EXPLANATION OF THE EXPENSE/PAYMENT:	
CHECK PAYABLE TO:	CHECK AMOUNT: (DO NOT INCLUDE SALES TAX PAID)
WHERE CHECK SHOULD BE SENT: (CHOOSE ONE)	
1) BACKPACK MAIL - CHILD'S NAME _____ ROOM # _____ TEACHER _____	
2) USPS - FULL ADDRESS _____	

ORIGINAL RECEIPT(S) TOTALING THE AMOUNT OF REIMBURSEMENT/PAYMENT MUST BE ATTACHED TO THIS FORM.

SYMMES ELEMENTARY PTO IS A TAX EXEMPT ORGANIZATION AND **CANNOT** REIMBURSE SALES TAX.

APPROVED BY COMMITTEE CHAIRPERSON: (SIGNATURE REQUIRED)	DATE:
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QUESTIONS? Contact Becky Lange, PTO Treasurer, at sypto-treasurer@sycamoreschools.org or 612-787-5965

FOR TREASURER'S USE ONLY: ACCOUNT # _____ CHECK # _____ DATE _____
AMOUNT OF CHECK (IF DIFFERENT THAN ABOVE) \$ _____ REASON _____