

DISBURSEMENT REQUEST 2024 - 2025
Fountain Green Elementary School PTA

Instructions: This form is for both reimbursement requests and payment of invoices. Complete form, attach original receipts or invoice and leave in "TREASURER" folder in PTA basket in office. It is strongly recommended that the receipts being submitted do not have any personal expenditures (i.e., separate purchases, if possible). Use a separate disbursement form for each committee/budget account. Requests will be picked up Mondays and Wednesdays. Since disbursement requires multiple signatures, please allow for 3 days for a check to be prepared. You will be contacted when reimbursement check is ready for pick up. Invoices will be mailed directly to vendor.

Date _____ Pay to the Order of: _____

Phone or Email Where You Can Be Contacted

Budget Category or Committee

Purpose (Please be specific – i.e., "Refreshments for visitors @ Am Ed Week") _____ \$ _____
Amount (\$\$)

Itemize and total expenses on the back of this form. Attach original receipt(s) or invoice.

(Below this line for Treasurer Use Only)

Paid by check no. _____ Check Dated: _____ Approval Date: _____

Treasurer: _____ President/Second Officer: _____
Signature Signature

Budget Category/ Committee: _____

Beg Yr Budget: _____ (Less YTD Disbursements): _____ Remaining Budget:

- A receipt detailing disbursement amount(s) and remaining budget was emailed to Committee Chair

Itemize Expenses *Please explain generally the expenses on each receipt: [i.e., Safeway – salads, sandwiches, and beverages for Open House luncheon \$72.00; Wegmans – Catering order & beverages for Teacher Conference Dinner, \$250.] Staple original receipt(s). Please do not mix PTA purchases with personal purchases and please use separate form for each committee/budget account. If an invoice is provided to you for direct payment by PTA to company, attach invoice and do not itemize.*

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

7 _____

8 _____

9 _____

10 _____

11 _____

12 _____

13 _____

14 _____

15 _____

Total Amount of Disbursement Request \$ _____

**This should match the total on all your attached receipts*