

<p>College Hills PTO Reimbursement Request - For purchase reimbursement or pre-payment of special expense items -</p>

Date: _____

Board Member Name: _____

Committee: _____

Expense Category: _____

Description / Immediate Need Justification:

 Approval Signature

<u>Vendor / Item:</u>	<u>Date:</u>	<u>Amount:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Amount \$ _____

*Do not include sales tax
 *Attach Receipts