

Brinker PTA Expense Request Form

Pay check to: _____ **Date** _____
(this is the name that will appear on the check)

Check is to be (choose one):

- Left at school
- Sent home with child Name _____ Homeroom _____
- Mailed to: Name _____
 Address _____

- Other:

Budget Category	Amount
	\$
	\$
	\$
	\$
	\$
	\$
Total amount to be claimed	\$

Additional comments/ expense breakdown:

Executive board or committee chair member signature _____
(All expenses must be approved by executive board member or committee chair)

Treasurer Notes

Check number: _____

Check amount: _____

Date paid: _____

Note: Forms must be complete, **filed within 30 days** of occurrence, and accompanied by valid receipts. PTA expenses are exempt from sales tax; **sales tax will not be reimbursed**. Tax exempt forms are available in PTA mail box or on www.brinkerpta.org/forms_list.jsp.