



Redwood High School PTSA Expense Reimbursement Request

ATTACH ALL RECEIPTS TO THIS EXPENSE REQUEST

Name _____ Phone _____

Address _____

City/Zip _____

Expenditure was for: _____

List of Expenses: _____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

TOTAL EXPENSE: \$ _____

Total Amount Claimed From Above: \$ _____

Minus Advance Received: \$ _____

Reimbursement Claimed: \$ _____

Not Claimed—Donate to PTSA: \$ _____

Refund to PTSA (enclose check): \$ _____

Signature _____ Date _____

For PTSA Treasurer Use: . Membership-approved activity . Funds released by membership
. Executive Board-approved expense

President's signature _____ Date _____

Secretary's signature _____ Date _____

Check Number	Category	Amount Advanced	Expenses	Amount Owed/Due

Submit Form To: Maria Clothier, PTSA Treasurer
64 Reed Ranch Rd., Tiburon, CA 94920 or Leave in PTSA Box in RHS Office