



Treasurer's Use Only

Date Posted _____
Account Posted _____
Amount Paid _____

OPE PTA Request for Reimbursement

Date _____

Payable to _____

Address _____

Phone Number _____

E-mail Address _____

Submitted By _____

Item Description	Who/What is this for?	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total _____

Signature of Person Requesting Check _____

PTA President or PTA Executive VP Approval _____

Distribution of Check

- put in treasurer's file (*see note below)
- mail to vendor
- mail to person requesting (**see note below)
- put in teacher's mailbox

*You will be notified when the check is ready to be picked up from the PTA Treasurer's file in the office.

**Please include a self-addressed, stamped envelope if you would like your check mailed to you. The treasurer will mail checks to outside vendors unless you specify otherwise.

Please complete the information above and attach receipts to this form. Place in the PTA box in the school office. Contact Sean Abate with any questions at 201-805-3322 or opeptatreasurer@gmail.com.