



Hornsby Middle School PTSA Expense Form 2017-2018 School Year

INSTRUCTIONS for Expenses:

1. *Fill out form completely.*
2. *Attach all receipts.*
3. *Give to Katie Winckler (804-370-9180 or Katie.winckler@gmail.com)*
4. *Place in the PTSA Treasurer mailbox in Hornsby office and inform Katie it is there*
5. *Present reimbursement requests no later than **2 weeks** after the expense.*
6. *Checks will be **canceled** if not cashed within 90 days.*

GENERAL INFORMATION

DATE: _____

Name of Requestor: _____

Committee Position (e.g., Membership Chair) _____

Phone Number: _____

Pay to: _____

Amount Requested: _____ (must equal receipts total)

Budget account charged to (e.g., Membership): _____

Delivery Method: **Mailing Address** – if you would like it mailed, please include a self addressed stamped envelope; **Folder Name**; **Pick up at Next PTA Meeting** or **Other Instructions** -

For Treasurer's Use Only

Checked by: _____

Check # _____

Date Paid: _____

Budget Account Charged: _____

Amount Paid: \$ _____

Budget Account balance remaining: \$ _____