

## Sandburg PTA Reimbursement Voucher (2018-2019)

Date: \_\_\_\_\_

Amount Requested: \$ \_\_\_\_\_

Make Check Payable to: \_\_\_\_\_

Send Check to: \_\_\_\_\_

Budget Line Item: \_\_\_\_\_

Itemized Expenses (Please provide details):

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Receipt/Invoice attached? \_\_\_\_\_ If not, why? \_\_\_\_\_

Approved by \_\_\_\_\_ PTA President

Please forward to: Krista Nunemaker, PTA Treasurer, 409 S. Fair Ave., Elmhurst, IL 60126

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### DO NOT FILL IN

Check Date: \_\_\_\_\_

Check#: \_\_\_\_\_

Amount: \_\_\_\_\_

### DO NOT FILL IN

Check Date: \_\_\_\_\_

Check#: \_\_\_\_\_

Amount: \_\_\_\_\_