

SERVICE HIGH SCHOOL PTSA
Reimbursement/Payment Voucher

Please attach your bills or receipts to this voucher for purchases made. Fill out PART A of the form below. When all documentation is complete and attached, return this to the treasurer. (PTSA mailbox)

This form enables the treasurer to keep records that are more detailed and track purchase and spending for accounts on budgeted expenditures.

Thank you.

A. Reimbursement to: _____ Committee/Office _____
Phone/Contact: _____ Date: _____

<u>Explanation of Bill</u>	<u>Amount</u>	<u>Category/Account(line item)</u>

Total Amount of Bill/Reimbursement:

Signature of Person Submitting Bill: _____

B. For Office/Treasurer Use Only

Check Made Out to: _____
Check Number: _____ Check Date: _____ Check Amount: _____

<u>Category/Account</u>	<u>Amount</u>

Treasurers Signature: _____