



Bay Laurel PFA Check/Reimbursement Request

Please submit your check request within 14 days of an event. Only items listed on the Budget Estimate will be reimbursed. Attach Budget Estimate & all receipts to this Check Request Form.

Today's Date:	
Date of Event:	
Name of Event:	
Chairperson(s)/ Committee Names:	
Chairperson/ Committee Contact Info:	
Budget Category: (leave blank if you are not sure)	
Event Budget as Provided by Treasurer: \$	

Reimbursement/Check Information:

Was this charge made w/ the PFA Credit Card?	YES NO <i>*For charges made to the PFA Credit Card, no reimbursement is needed.</i>
Make Check Payable To:	
Name, Address, Email, Phone of Payee:	
Memo on Check: (Invoice #, etc)	
If Vendor, does the PFA have their W9 Form?	YES NO (circle one)
MAIL check or pick it up in OFFICE?	MAIL PICKUP (circle one)

Receipt/Expense Breakdown

Item #	Description of Item *(INCLUDE ALL INVOICES/RECEIPTS)	Cost
1		
2		
3		
4		
5		
6		
7		
8		
	TOTAL	\$

TOTAL REINBURSEMENT: \$_____

If a PFA Board member is requesting this reimbursement, another board member must sign approval.
 If a teacher is using this form to request a payment to a vendor, please have the Principal sign below.

PFA BOARD MEMBER APPROVAL: _____ DATE: _____

Contact dolphintreasurer@gmail.com with questions.