

**ST. MARY SCHOOL PTU
EXPENSE REIMBURSEMENT REQUEST**

REIMBURSEMENT AMOUNT.....\$_____

MAKE CHECK PAYABLE TO _____

DESCRIPTION OF EXPENSE _____

COMMITTEE NAME _____

(if applicable)

REQUESTED BY _____

DATE _____

Please submit form to school office attn: PTU

FOR PTU USE

Approved by _____

Check # _____

Date _____