

Our Lady of Fatima Parish School **PTC Expense Reimbursement Form**

Please staple original receipts or invoices to this form and return it to the school office.

This form is to be used for reimbursement of Scrip, Fall Festival, Auction, PTC Committee, and other PTC Expenses. For other expenses, please use the School Reimbursement Form.

Please complete and return this form, along with your original receipts or invoices attached, to the PTC Box located in the school office. After receipt of this form, payment will be made. If you have any questions, please contact the PTC Treasurer.

Date Subm	nitted:					
Purpose:_					_	
Post to (cir	ccle):					
Scrip	Fall Festival	Auction	PTC Committee Expenses	other: (specify)		
If room pa	rent expense, whic	h teacher/gra	de?			
Amount: \$						
Make payn	nent to:		(please prir	nt name)		
Mail paym	ent to:					
			OR			
I will pick	up reimbursement	check from tl	ne school office.	Yes	No	
•	•				·	
	ICE USE ONLY					
Approved b	y:(C h	ristopher Smi	th, Principal)			
Department	·	-				
	•••••		•••••			
For PTC Use	e Only					
Date Receiv	ved:					
Date Paid:						
Check #:						