



GFS/JWL PTO STAFF REIMBURSEMENT FORM 2016—2017

For reimbursement of expenses incurred from GFS/JWL PTO, please complete the form below. Please also include copies of receipts, etc., to the back of this form. Please keep a photocopy for your own records.

****All completed Reimbursements must be presented at a PTO Meeting.**

Please note that reimbursements are not a guarantee. The PTO Board will review and vote on submitted Reimbursements.

Date: _____

Activity/Event: _____

Teacher/Chairperson(s): _____

Total Reimbursement

No. of Receipts: _____ **Amount: \$** _____

Check Payable to: _____

Phone Number: _____

Email address for notification when check is ready:

Explanation of Expenses:

PTO Treasurer's Use only: Check Date: _____ Check #: _____