



Eastlake High School PTSA 400 - 228th Ave NE Sammamish, WA 98074
www.ehsptsa.org

EASTLAKE HIGH SCHOOL PTSA 2.8.88
REQUEST FOR REIMBURSEMENT

DATE: _____

AMOUNT REQUESTED: \$ _____

DESCRIPTION OF REIMBURSEMENT/CHECK REQUEST:

REQUESTED BY (name/PTSA position): _____

APPROVED BY (name/PTSA position): _____

MAKE CHECK PAYBLE TO: _____

WHAT TO DO WITH CHECK (**pick one**):

- Drop it off in my box at school
- Mail it to this address:
 - Name: _____
 - Company: _____
 - Address: _____
 - City: _____
 - State/Zip: _____

Deliver form with required receipts or invoice/bill to EHS PTSA mailbox at school, or mail to EHS PTSA Treasurer, 400 228th Ave NE, Sammamish, WA 98074

Per EHS PTSA Standing Rules: All reimbursement requests for authorized expenses **must include a receipt** and be submitted to the Treasurer within 60 days of purchase. All requests for reimbursement must be received by June 15 or they will be considered a donation to the PTSA.

Questions? Email treasurer@ehsptsa.org

FOR TREASURER'S USE ONLY

CHECK # _____

AMOUNT _____

DATE CHECK ISSUED _____

BUDGET CATEGORY _____