GLENVIEW ELEMENTARY PTA REQUEST FOR REIMBURSEMENT / PAYMENT AUTHORIZATION

Please submit/attach ALL receipts with this expense statement. **Note: purchases made with gift cards or points are NOT eligible for reimbursement

Check requested by (name):		Date:	C ATEGORY: (please choose one)
	Check Del	livery (please choose one below):	Academic Support & Enrichment
Email*:	O Please le	eave in my office mailbox	 5th Grade Experiential Science Glenview Science Fair Library Program Music Program Raz Kids Reading Program
C II			
Cell:			
PTA Position*:	O Please m	nail to:	
11A103tto11	Address:		
Committee/Event:	City	StateZip	Teaching Supplies & Field Trips
			Classroom Supplies
Invoice attached	Receipt Attached	Other Attached	O Field Trips
Please Note: In accordar	nce with PTA rules, there can be no p	payment without hack-up	Garden Program
Request must be submitted within 60 days to insure payment.			○ Maker Space
			PE Program SuppliesPrincipal
			O SBAC Snacks School
Make check payable to*:			O Folders TSA
Expenditure was for:			O Toldels 13A
List Expenditures:			Community Events & Enrichmen
EIST EXPENDITURES.			○ Kinder Welcome/Popsicle Social
			○ Walk & Roll To School
			○ Fall Carnival
			O Movie Nights
			O Talent Show
			O Culture & Representation
			Family Reading NightSpring Thing
			Sth Grade Promotion
			Committees
	Total Amount Requ	ested \$	
			O Found It!
		_	Fundraising Carden Committee
Requesting Signature*		Date	Garden CommitteeG.E.T.I.T. (Equity Committee)
Questions re: Reimbursement:			Glenview Cares
			O Glenview Gear (Merch)
			Kinder Welcome Committee
			Facility & Admin Support
* = Required field			○ School Health & Safety
			 Site Improvement
	PTA USE ONLY		 Technology Supplies
Tracking/Request Number:			 Walkie Talkies
Date Request Received:		Membership-approved activity	PTA Administration
Date Processed:		Funds released by membership	O CPA & Accounting Software
Check Number:		Executive Board-approved expenditure	O Communications
Date Approved In Minutes:			O Contingency
Date Approved in Minutes.			O Hospitality
President's signature:		Date:	Office Symplice & printing
Date approved in minutes:	Financial Secretary's signature:		Office Supplies & printingTaxes
			Other

 $Include/attach\ all\ receipts\ \&\ invoices\ with\ form\ submission\ to:\ glenviewelementary pta. fisec@gmail.com.\ Or\ place\ printed\ copies\ in\ PTA\ mailbox.$

