

**FS Key School PTA  
Check / Reimbursement Request Form**

Budget Item / Program: \_\_\_\_\_

Requestor's Name: \_\_\_\_\_

Requestor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Check Request – combine requests for a single payee – provide budget details below

Amount: \_\_\_\_\_

Payable To: \_\_\_\_\_

Credit Card Purchase – one form for each vendor

Amount: \_\_\_\_\_

Payable To: \_\_\_\_\_

The IRS requires the PTA to substantiate expenses with ORIGINAL receipts. Please attach.

**Explain \*\*\* Describe \*\*\* List Subtotals**

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**Thank you for supporting Key School!**

Approved by (and date): \_\_\_\_\_

Additional approval (over \$100 and non-budgeted items): \_\_\_\_\_

PTA Budget Category / Year: \_\_\_\_\_

Check #: \_\_\_\_\_ Date: \_\_\_\_\_