# Novato High School PTSA
# Payment / Reimbursement Request Form

Please complete all information and ATTACH RECEIPTS to the back of this form.

Amount of Request: $_____

Payable to: _____

Mailing Address for Payee: ☐ *Please check box if check is to be mailed*

_____

_____

Description of the request: (Example: "Reimbursement for classroom supplies")

_____

_____

Requested by: _____ Date: _____

All checks will be returned to the requester unless otherwise indicated. For questions, please contact Jane White at novatohighptsatreasurer@gmail.com.

Please indicate the PTSA Budget Category to charge the expense to.

PTSA Budget Categories:

- ☐ Academic Boosters
- ☐ Admin Requests
- ☐ Awards / Thank You / NMC Dinner
- ☐ Black & Gold
- ☐ Campus Improvement
- ☐ Classroom Supplies Reimbursement
- ☐ Communications
- ☐ Other: _____
- ☐ Disaster Preparedness
- ☐ Hospitality / Staff Appreciation
- ☐ Miscellaneous
- ☐ Printing / Postage
- ☐ Reflections
- ☐ Start Up Supplies
- ☐ Technology

_____

***For PTSA Use Only***

Within Budget: _____ Check Number: _____ Date Check Issued: _____

Approved by: _____ President

Approved by: _____ Secretary