



## Dennison Elementary PTA Expense Reimbursement Form 2017 - 2018

Please provide your address, checks will be mailed.

Date	Committee or Account	Items/Explanation	Amount

**Check Payable to:** \_\_\_\_\_ **Total Amount:** \_\_\_\_\_

**Mail to:** \_\_\_\_\_

**Additional Comments:** \_\_\_\_\_

Date entered into Quickbooks \_\_\_\_\_  
 Check Number \_\_\_\_\_  
 Date Paid \_\_\_\_\_