

**Alexandria PTA Council  
Reimbursement/Check Request Voucher**

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Committee: \_\_\_\_\_

Activity: \_\_\_\_\_

Date of Expense: \_\_\_\_\_

Check Payable to: \_\_\_\_\_

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

**Purchase order, invoice, bill or receipt must be attached.**

Date Check Needed (if applicable): \_\_\_\_\_

Delivery Method:  PTA Council Meeting  Mailed

US Mail Address: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

PTA Council President Approval Signature: \_\_\_\_\_

*Please deliver this form with paperwork to:* PTA Council Treasurer  
P.O. Box 3134  
Alexandria, VA 22302

- Reimbursement requests must be submitted **within 30 days** of the expense.
  - Expenses that occur before June 1 of a given year cannot be reimbursed after June 30 of that year.
  - PTA Council will only reimburse expenses that are in the budget, approved by the President in advance, or approved by a General Membership vote in advance. --
  - Do not combine reimbursement requests for more than one activity even if it is within the same committee.
  - Receipts should not include non-PTA Council expenses.
- \*If you do not meet these requirements and would still like to be reimbursed, contact the Treasurer or President.\**

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**Treasurer's Use Only**

PTA Council Check Number: \_\_\_\_\_ Date of Check: \_\_\_\_\_

Expense Line Item: \_\_\_\_\_