



ST. MICHAEL SCHOOL PTU
REIMBURSEMENT FORM/CHECK REQUEST FORM

Fill out form completely, attach receipts and return to PTU Treasurer.

Date _____

Project Name _____

Submitted by _____

Phone _____

Email _____

Check to be sent Name _____

Address _____

City/State/Zip _____

Description of Purchase	Amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total	_____

Treasurer Use Only		
Check Number _____	Amount _____	Date _____
Budget Category _____		