



Nancy Young PTA Voucher Form For Reimbursements

Date _____
Amount of Reimbursement _____
Committee Name _____
Name of Event (if applicable) _____

Please attach all
receipts here.

Please itemize expenditure(s)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Use additional sheets if necessary and forward to PTA Treasurer

Check should be made payable to:

Name _____
Address _____
City, State, Zip _____
Phone # _____
Oldest Child's Name & Class _____

Approved By _____
(President or Standing Committee Chair Signature)

Treasurer's Use Only

Check # _____ Date of Check _____ Voucher # _____