



Creekside Elementary

**PTSA**

everychild.one voice.®

**Creekside Elementary PTSA**

20777 SE 16th Street, Sammamish WA 98075

[www.creeksideptsa.ourschoopages.com](http://www.creeksideptsa.ourschoopages.com)

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**2019-2020 Reimbursement Request Form**

Instructions: Please complete all unshaded areas of the form. Attach original invoices, receipts, or billing statements. Please remember to include sales tax on reimbursable items. Submit to PTSA Treasurer, or drop in the PTA Box located in the Creekside Office. Remember all checks require 2 signatures, so please allow sufficient time.

Requestor \_\_\_\_\_ Date \_\_\_\_\_

Committee/Event \_\_\_\_\_ Amount Requested \_\_\_\_\_

Budget Category \_\_\_\_\_

Payable To \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Reason \_\_\_\_\_

\*Authorized Signer \_\_\_\_\_ Date \_\_\_\_\_

\*Committee Chair (if you are a PTSA Member) / Principal (if you are a Staff Member)

Treasurer Contact Info: Eleanor Robinson [eleanor.robinson@live.com](mailto:eleanor.robinson@live.com)

**TREASURER USE ONLY**

Check # _____	Date Received _____
Date Paid _____	Check Amount _____