

## BRIMFIELD GRADE SCHOOL PTO

## EXPENSE REIMBURSEMENT FORM

All expenses should be pre-approved to ensure full reimbursement.

Make check payable to:	
Purpose of Expense:	
Date of request:	
List items purchased:	
Total amount of requested: \$	

\*\* PLEASE ATTACH ALL RECEIPTS
\*\* PLEASE RETURN REQUEST FORM TO PTO TREASURER

PTO USE ONLY		
Date approved:		
Date mailed:		