Rock Creek Elementary PTC // 2024-2025 Reimbursement + Check Request Form

Name:		Date:		
Email:		Phone:		
Reimbursement or Check Request Pa	ıy to:			
 Reimbursements may be turned in at any time to the Treasurers mailbox. The PTC Treasurer will collect reimbursement requests at 8am on the last school day of the month; reimbursement checks will be returned to the Treasurer's mailbox on the 15th of the following month. Line-item receipts from vendors must be provided. Please identify the line items on the receipt you are requesting reimbursement for and attach it to this form. Select the budget line item on the table below for the submitted expense(s) + Sign the expense report. Check Requests should be made 2 weeks prior to the need by date. An invoice on the vendor letterhead must be provided. You are responsible for mailing/submitting payment to the vendor. Please email the treasurer once the check request is in the treasurer's mailbox. You are responsible for keeping a copy of your expense report and the submitted receipts. Rarely does paperwork get misplaced; however, the secondary copy will ensure reimbursement. 				
Budget Category	Amount	4 1		
50th Anniversary Event		1 1	Total Amount:	
File County College Co		1 1		
Affinity Club		1 1		
Assemblies		1 1		
Back to School Events		1	Board or Principal	
Board Admin Expenses		1	Signature:	
Board Misc. Expenses		1 1		
Classroom + Staff Funds		1 1		
Fall Movie Night		1 1		
Field Day		1		
Field Trips		l		
Kindergarten Orientation				
Multicultural Night				
OBOB		For	r Treasurer Use:	
Primary Fundraiser Expenses		Do	nte Paid:	
Room Party Fund			nount Paid:	
Spring Carnival			neck Number:	
Spring Dance			ite Check Cleared:	
Staff Appreciation		Re	view Date:	
Staff Snacks + Water Service			viewers Initials:	
Other (Requires Board Approval):				