Rock Creek Elementary PTC // 2026-2027 Reimbursement + Check Request Form

Name: ______________________________ **Date:** ______________

Email: ______________________________ **Phone:** ______________

Reimbursement or Check Request Pay to: ______________________________
(circle one)

- **Reimbursements** may be turned in at any time to the Treasurer's mailbox. The PTC Treasurer will collect reimbursement requests at 8am every other Friday and will work to have them returned in 2 weeks.
  - 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.

Your Signature: ______________________________

Budget Category	Amount
5th Grade Celebration + Yearbook	
Back to School Events	
Board Admin Expenses	
Board Misc. Expenses	
Book Fair	
Classroom(SQ1Art) /**Staff /Principal** Funds	
Fall Movie Night	
Field Day	
Field Trips (incl. Buses)	
Kindergarten Orientation	
OBOB	
Rocket Run Fundraiser Expenses	
Spring Carnival	
Spring Dance	
Staff Appreciation	
Staff Snacks + Water Service	
Other (Requires Board Approval):	

Total Amount:
Board or Principal Signature:

For Treasurer Use:
Date Paid:
Amount Paid:
Check Number:
Date Check Cleared:
Review Date:
Reviewers Initials:

Questions: admin@rockcreekptc.org