

Westport PTA Council
Reimbursement Check Request Form

Instructions:

1. Complete this form.
2. Attach receipts, highlight relevant reimbursement items and verify that the amount matches the total requested on this form.
3. Email/mail this form and receipts to the PTA Council Treasurer:

Melissa Signorile

8 Windy Hill Rd

Westport, CT 06880

msignorile@me.com

Date: _____

Your Name: _____

Email Address: _____

Address: _____

Phone: _____

School: _____

Event: _____

Expense Description	Amount
Total	\$