

St. Louis de Montfort Reimbursement Request PTO

Name: _____
 Address: _____
 (New address? Check box.) _____

Date Check Needed: _____
 Expense Effective Date: _____

(Please submit 2 weeks prior to date check is needed)

Part A: Expense reimbursement

Reimbursements will not be processed without supporting receipts for purchases. **SALES TAX WILL NOT BE REIMBURSED.** Please obtain a tax exempt certificate from your supervisor to avoid paying sales tax.

ALL REIMBURSEMENTS MUST BE SUBMITTED BY THE END OF THE MONTH IN WHICH THE EXPENSE OCCURS

Choose from the following Activity Codes:

Use with General Ledger Code 7110:

221 Playground Equipment	237 Field Day	251 Muffins with Mom
229 PTO Movie Night	238 8th Grade Graduation Brunch/Dance	252 Special Guest Days
232 Donuts with Dad	241 Cultural Enrichment	255 First Communion Reception
234 Cardinal Kick Off	243 Staff Appreciation Week	257 Student Council
235 Locker Decorating	244 ONGOING Staff Appreciation	
236 Catholic Schools Week	246 Hospitality Committee	

Use with General Ledger Code 7150:

222 Poinsettia Sales	239 General Mills/Boxtops
223 Spring Fundraiser	253 Santa Shop/Elf Shelf
225 Mother/Son Kickball Tournament	299 Unassigned Activity

Other:

259 Mascot Maintenance (Use GL 8900)	299 Unassigned (Use with 8810 or 8900)
260 Student Lunches/Cardinal Café (Use GL 7130)	

Date of Expense	Description of Expense	Ministry	Program	(see above)	(see above)		Amount to be reimbursed	Receipt Attached?
				Activity	General Ledger			
		2	290					
		2	290					
		2	290					
		2	290					
		2	290					
TOTAL							\$ -	

Submitted by: _____ Date: _____

Approved by*: _____ Date: _____

Approved by*: _____ Date: _____

***All Reimbursements must be approved by the PTO Treasurer and Principal before being submitted to Accounting.**

Received by: _____ Date: _____

Processed by: _____ Date: _____