

# Ravenwood Elementary PTSO Reimbursement Request Form

**Requested By:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Date:** \_\_\_\_\_  
**Total to Reimburse:** \_\_\_\_\_

All reimbursements will need approval of the PTSO Board, preferably before the purchase. Please have a receipt attached to this form. All reimbursement forms must be turned into the PTSO Treasurer, or the front office at Ravenwood Elementary School.

**Reason for Reimbursement:**

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**Approved By:** \_\_\_\_\_  
**Date Submitted:** \_\_\_\_\_  
**Date Reimbursed:** \_\_\_\_\_  
**Budget Item Charged:** \_\_\_\_\_  
**Check #** \_\_\_\_\_