



SHORECREST PTSA REQUEST FOR REIMBURSEMENT

Requests can be placed in the PTSA Treasurer's File in the Shorecrest office or mailed to: Shorecrest High School, Attn: PTSA Treasurer, 15343 25th Ave NE Shoreline, WA 98155

Please note; reimbursement requests MUST be returned within 30 days of purchase/date on receipt (for Committee budgeting purposes). If you would like your check mailed, please include a self addressed stamped envelope.

Today's Date: _____ Date of Purchase: _____ Check payable to: _____

Check delivered to PTSA folder? _____ If folder, what folder? _____

If mailed - Address: _____ Email: _____

Phone: _____

Amount: \$ _____ (Receipts must be attached).

Committee and Budget Expense to be charged? _____

Describe items/expenses: _____

Committee Head/Board Signature: _____

For Treasurer's Use

Amount \$ _____ Date _____ Check # _____



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