



McCall Elementary PTA
Reimbursement Voucher



Payable To		Date Submitted	
Address		Date Needed	
		Phone	

Submitted by/Chairman: _____

Item	Place of Purchase	Budget Category	Amount
TOTAL			

Treasurer's Notes	
Date Received	
Plan of Work?	
Date Approved	
Date Paid	
Check Number	
Check Amount	

- Attach original receipts/invoices to voucher
- No disbursements will be made without a receipt
- Sales tax will NOT be paid

Comments

Signatures	
President's Signature	
Treasurer's Signature	
Chairman's Signature	