

North Ridge PTA

Unit Code 05-136

Expense Voucher

Date Requested: _____

Payee: _____ Amount \$ _____

Committee Name: _____

For (describe nature of expense):

Please send reimbursement home with my child

Teacher's Name: _____

Child's Name: _____

Send reimbursement to:

Vendor name: _____

Vendor address: _____

Please leave reimbursement in PTA Mailbox

Attention to: _____

ACCOUNT: (For Treasurer Use Only)

Payee: _____

Amount Paid: _____

Check #: _____ Check Date: _____

A/C # _____ A/C Name _____