



Sparta Township
Public Schools

Helen Morgan School

Parent Teacher Organization
Executive Board

HELEN MORGAN SCHOOL PTO EXPENSE REIMBURSEMENT FORM

- * Please attach receipt(s) or bill(s) to the back of this form.
- * Requests must be submitted within **30 days of event**.
- * Keep a copy of receipts, bills, and this form for your records.
- * **Use a tax exempt form when purchasing items for the PTO.**

Date: _____ Committee: _____

Requested by:

Name: _____ Phone: _____

Email: _____ Amount Requested: _____

Purpose of request: _____

Check should be issued to: _____

(Include address)

<p>Submit completed form with receipt(s) or bill(s) attached to: Attn: Caitlin Trance HMS PTO 100 Stanhope Rd, Sparta, NJ 07871</p>
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TREASURER'S USE ONLY

Approved:

Caitlin Trance, Treasurer

Melanie Zywicki, President

Check # _____ Date _____ Given to _____

Bill Pay # _____ Date processed _____