



PTO Reimbursement Form

Event: _____

Date _____

Filed by: _____

Receipt Recap

****Please attach receipts to this form.****

<u>Purchased From</u>	<u>Items Purchased</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total: _____

Approved By: _____