

NGES PTG Reimbursement Form

This form must be submitted in order to receive reimbursement for PTG business. **Please attach all receipts** (if applicable). If receipts are missing a missing receipt form must accompany this form. Please type or write legibly on this form

Date form completed: _____

Full Name (Legal name for check "make payable" line): _____

Grade/Specialty: _____

Email Address: _____

Parent Volunteer (circle one)? Y / N

Contact #: _____

Program(s)/Event(s) re-imburement is requested for: _____

Please check one box below:

Send check home in student's backpack:

*If above option is checked, please annotate teacher's name and first name of child: _____

Send to office for pickup or place in school mailbox:

*If above option is checked, please annotate whether NGES or NSS Office: _____

Send in mail:

*If above option is checked, please annotate full mailing address below: _____

ITEM #	BUDGET LINE ITEM	ITEM & DESCRIPTION (ONE LINE ITEM PER RECEIPT)	DATE OF PURCHASE OR SERVICE	REIMBURSEMENT AMOUNT \$\$
Example	NGES ASEP	Supplies for Lego Enrichment/Services for Lego ASEP	Actual date or range of dates	\$ 50.00
1				\$
2				\$
3				\$
4				\$
5				\$
6				\$
7				\$
8				\$
TOTAL REIMBURSEMENT AMOUNT:				\$

Signature of Requester: _____

FOR PTG USE ONLY:

Approved by (Name): _____

Date: _____

Initials: _____

Check #(s): _____

Date check submitted to requestor: _____

For reimbursements related to events and enrichment, please send to Monica Rogers (monica.mayall@gmail.com) teacher reimbursements are sent to Kristin Wood (kristin_wood@hotmail.com) (or for either: ngesptgtreasurer@hotmail.com) or place in PTG (NSS) or Treasurer (NGES) mailbox. An email notification when a hard copy is placed in mailbox will expedite reimbursement.