



# Issaquah Middle PTSA

400 1st Ave SE  
Issaquah, WA 98027

Check # \_\_\_\_\_

## PAYMENT / REIMBURSEMENT FORM

Date: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Submitted by: Name \_\_\_\_\_

Signature \_\_\_\_\_

Check payable to: \_\_\_\_\_

Funds used for: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***\*\*Attach Receipts or Invoice\*\****  
***\*\*Put completed form in PTSA Box\*\****

\*\*\*\*\*

IM PTSA Treasurer

Check # \_\_\_\_\_ Check Date \_\_\_\_\_ Check Amount \$ \_\_\_\_\_

Check Paid to: \_\_\_\_\_

Budget Line : \_\_\_\_\_