

Kolb PFC Expense Reimbursement Form

- This form is used for approved expenses by Kolb Elementary teachers, staff & volunteers.
- All areas must be completed.
- Reimbursement checks will be issued within 10 school days from date of submission.
- Receipts must be attached to this form.
- List each receipt separately and write total at the bottom.

Budget Line: Please Check One					
Classroom Stipend		I Grade Level Grant	Other		
<u>Details</u>					
Date:					
Name:			Grade/Class:		
Address (if you prefer to have your check mailed):					
Receipt Date	Program/ Activity	Purpose of Exp	pense	Amount	
TOTAL:\$					
For PFC Purposes NOTES:					
NOTES.					
Treasurer Approval:		Paid by:	Date:		
Check#:		Budget Line:			