



**Parr's Ridge & Mount Airy Elementary  
Request for Reimbursement & Vendor Check Request**

Please submit to: Terence Sullivan, Treasurer

Should you have any questions or need further assistance please email [Terence\\_sullivan\\_jr@hotmail.com](mailto:Terence_sullivan_jr@hotmail.com)

Complete All Sections (I, II & III)

**Section I - Request for Reimbursement**

Name	
Date	
Reimbursement Amount	\$
Reason for Request	

**Section II - Check Request for Vendor (please attach the vendor invoice to this form)**

Date	
Invoice Number	
Invoice Date	
Invoice Amount	\$
Payable To	
Address	
Date Needed	

**Section III - Authorization**

Requested By	
Return Payment To	
Special Instructions	

Signature:

Authorized by PTO Treasurer:

Date Paid:

Note: