

# Claymont PTO Reimbursement Request Form

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

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Child's Teacher & Grade: \_\_\_\_\_

**ATTACH SALES RECEIPTS TO THIS FORM** – Note: Please use a tax-exempt form for purchases made (copies available in the school office or on the PTO website), as sales tax will not be reimbursed. Your reimbursement will be sent home with the child noted above, or sent to the address noted above

Please indicate the appropriate committee and/or event related to this request:

- |   |  |
|---|--|
| <input type="checkbox"/> Abilities Awareness day              | <input type="checkbox"/> Insurance / Taxes         |
| <input type="checkbox"/> Arts Partners / Springboard Learning | <input type="checkbox"/> Kids vote                 |
| <input type="checkbox"/> Beautification                       | <input type="checkbox"/> Misc PTO                  |
| <input type="checkbox"/> Benevolence / Claymont Assistance    | <input type="checkbox"/> Multicultural/STEAM Night |
| <input type="checkbox"/> Cardinals night                      | <input type="checkbox"/> Red Ribbon Week           |
| <input type="checkbox"/> Chatterbox                           | <input type="checkbox"/> Room parent fund          |
| <input type="checkbox"/> Donations                            | <input type="checkbox"/> Staff appreciation        |
| <input type="checkbox"/> FACT-astic Math                      | <input type="checkbox"/> Talent show               |
| <input type="checkbox"/> Family Night                         | <input type="checkbox"/> Teacher fund              |
| <input type="checkbox"/> Fifth grade celebration              | <input type="checkbox"/> Trivia Night              |
| <input type="checkbox"/> Fun and Fitness                      | <input type="checkbox"/> Trunk or Treat            |
| <input type="checkbox"/> Generation to Generation             | <input type="checkbox"/> T-shirts                  |
| <input type="checkbox"/> Gifts                                | <input type="checkbox"/> Welcome committee         |
| <input type="checkbox"/> Girls On The Run                     | <input type="checkbox"/> Yearbook committee        |
| <input type="checkbox"/> Other _____                          |  |

***Thank you!***

OFFICE USE ONLY:

Rcvd: \_\_\_\_\_ Amount: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Check #: \_\_\_\_\_