

# Payment Authorization / Request for Reimbursement

**Payee**

Jessica Park

**Phone**

(555) 333-3333

**Address**

1200 Oak Street  
Springfield, CA 90210

**Email**

jessica@demo.futurefund.com

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**Expenditure Description**

Date	Merchant	Category	Amount
Apr 15, 2026	Best Buy	Office Supplies	\$299.99
<b>Total</b>			<b>\$299.99</b>

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Signature

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Signature of VP/Chairman for Program/Event

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Date

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Date

**For PTA Treasurer Use**

- Membership – Approved Activity
- Funds Release by Membership
- Executive Board – Approved Expenditure

Check Number	Category	Amount Advanced	Expenses	Amount Owed or Due

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President Signature

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Date Approved in Minutes

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Date

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Secretary's Signature