



# Las Brisas PTSA 2023-2024

## Staff Reimbursement/Request for Funds

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

Amount: \$ \_\_\_\_, \_\_\_\_ . \_\_\_\_

### Reason for Request:

Classroom PBL/STEAM  
Materials (up to \$200)

Classroom Reimbursement  
(up to \$100)

Other

Details: \_\_\_\_\_

Invoice #: \_\_\_\_\_

Requested by: Name \_\_\_\_\_ Signature \_\_\_\_\_

Make Check Payable To (if different than requested by): \_\_\_\_\_

**\*\*Receipts must be attached\*\***

\*\*\*\*\* Treasurer Use Only \*\*\*\*\*

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

Date Issued \_\_\_\_\_

Treasurer Signature \_\_\_\_\_

Audited by Signature \_\_\_\_\_