



REDDING SCHOOL OF ARTS
WHERE EDUCATION AND THE ARTS CONNECT
 雷丁艺术学校
 教育与艺术融合的舞台/殿堂

2011/2012 Check No.
Office Use Only

PARENT TEACHER CLUB REIMBURSEMENT FORM

Submitted by _____ Phone number _____ Email _____

Committee or Department _____ Date _____

Make Check Payable to _____

Pick Up at RSA _____ or Mail check to _____

DATE	DESCRIPTION	TOTAL AMOUNT
	GRAND TOTAL	\$

I hereby certify that the above is an accurate accounting of my expenses incurred on behalf of Redding School of the Arts Parent Teacher Club, and I have attached copies of receipts and/or proof of payment. (Please keep a copy for your records and allow 7 to 10 days for reimbursement.)

Requestor's Signature: _____

PLEASE DO NOT WRITE BELOW THIS LINE. FOR OFFICE USE ONLY.

PTC Chair Approval Signature: _____ Date _____
PTC Officer Approval Signature: _____ Date _____