**Timbercrest Middle School PTSA**

**Request for Payment / Reimbursement**

**For Reimbursement of personal funds used for PTSA reimbursable expenses:**

1. Fill out form below in full. Be as complete as possible!

2. Attach all receipts to top (original) copy. THIS IS NOT OPTIONAL.

3. Submit the entire original to your Committee Chairperson for approval of expenses and then the original signed copy and original receipts should be given to the Treasurer in the PTSA mailbox in TMS office. Email treasurer letting them know it’s there.

4. Requestor and Chairperson should keep a copy for their records.

# DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REQUESTED BY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Itemize purchases below and attach ORIGINAL Receipts

# PLEASE DO NOT COMBINE PERSONAL AND PTSA TRANSACTIONS ON THE SAME RECEIPT

|  |  |  |
| --- | --- | --- |
| **Event** |  |  |
| **Committee Chair or PTSA Pres. Approval** |  |  |
| **Where Purchased** | **Item Description** | **$ Amount** |
|
|  |  |  |
|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total** |  | **$** |

# *Please use the back to itemize additional purchases.*

**Reimbursement instructions:**

1. All requests should be submitted within 2 weeks of the event or purchase date
2. Attach original receipts – not copies. Do not combine personal and PTSA transactions on the same receipt
3. All fields must be complete
4. Approvals – Committee Chair or Officer must provide approval prior to submission
5. The treasurer will leave a check in the PTSA mailbox for you. If you would like it mailed, please attach a self-addressed stamped envelope.

**Treasurer Record**

Date Paid Check # Amount Paid

Dear Committee Chair:

***Thank you for serving our Timbercrest community by chairing this event/program.***

* As a committee, please summarize the plans regarding your event/program for review by the PTA Board.
* When finished, please email to the PTSA Vice President for PTSA Board approval. This form must be approved before event planning begins.
* Thank you!

Name of Committee **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date of Event/Program\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Budget Amount\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Committee Members\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please describe your goal for your event/program (include information about entertainment, food served or sold, cost to attendees or other considerations):**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Plan the needs of your event or program:** Check what resources you plan to use and notes to help you organize needs. (Refer to committee folder for support contact info)

Communication/Advertising: Fliers Website Facebook

Pack Report Reader board

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Logistics: Facility Reservations Volunteers Sponsorship

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Plan the expenses and income (if applicable) of your event or program.**

Expenses may include: Flyers, Food, Entertainment, Decorations, etc.

Estimated Budget Breakdown (complete below, attach additional sheets if needed)

|  |  |  |  |
| --- | --- | --- | --- |
| **Expense** | **$** | **Income** | **$** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total Expenses |  | Total Income |  |

**FOLLOW UP - After the event or program is finished:**

* **Expense receipts:** Turn in all receipts with a reimbursement request. Two signatures are required; one should be the committee chair.
* **Submit a short summary of the event or program for the TMS PTSA website and Pack Report:** Describe the success of the event and thank all volunteers.
* **Thank your committee and any other helpful volunteers:** You can thank them via email.
* **Debrief with your contact on the Executive Committee, Vice President.**

Submitted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Presented to Board: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved: YES / NO / YES, with recommendations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Executive Committee Representative Signature & Date:

**Information for running an event at Timbercrest**

Please contact Timbercrest PTSA Vice president with questions.

**Operations**

1. All district rooms, including any rooms at Timbercrest, must be reserved through the TMS PTSA Secretary.
2. All contracts must be approved and signed by TMS PTSA Co-Presidents.
3. Food handlers Permit may be needed if your event has concessions.
4. Sound system in the cafeteria—Please contact School Technology Specialist.
5. For custodial questions—Please contact Joan Law.

**Marketing**

1. District wording needs to be on flyers. *ATTACH WORDING*
2. Discuss with Teri Weir locations to hang posters.
3. Inexpensive printing can be done through the district Graphics Center, contact: gcenter@nsd.org

**Finances**

1. For events handling money, two counters must count all funds and document it using the Revenue Receipt. The form is on the TMS PTSA website. All money should be given directly to the Treasurer to count and deposit.
2. A Reimbursement form is attached. It can be printed from the TMS PTSA website.
3. Please email the treasurer or vice president for budget amount.

**Contact Sheet**

**Co-Presidents:**

**Vice President:**

**Secretary:**

**Treasurer:**

**TMS Facebook Page and Website:**

**Terri Weir, TMS Office Manager:**

**Kristie Brower:**

**Toby TMS Technology Specialist:**

**Joan Law, Head Custodian:**

**Custodian Cell:**