

Kingston PTO Expense Reimbursement Form

Date: _____

Submitted by:

Committee:

Purpose of Expense:

Amount of Request: _____

Check payable to:

Deliver to: _____ *KES/KIS PTO mailbox (circle one)*

_____ *Address below*

Comments/Notes:

Signature:

*Please submit form along with receipts & supporting documents in a sealed envelope.
Envelope can be placed in the PTO mailbox located in main office at KES.*

Reimbursements will be sent on the 15th and last day of the month.

Tara Johnson, KPTO Treasurer

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