

**Kingston PTO Expense Reimbursement Form**  
*www.KingstonPTO.com*

*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.***

Karen Renner, KPTO Treasurer  
*krenner03@yahoo.com*