

# Lander Elementary School PTG

1714 Lander Road, Mayfield Heights, Ohio 44124

## Expense Reimbursement Form

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

Payee: \_\_\_\_\_  
(The name of the person or company the check is to be made out to.)

Amount: \$ \_\_\_\_\_

Committee: \_\_\_\_\_

Reason: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

***Please follow these instructions:***

- Fill out the form completely and be specific with the reason for reimbursement
- Attach supporting documentation showing expenditure (copies are fine)
- Please note that the PTG is tax exempt; these will not be reimbursed. (Ohio tax exempt number 34-1660758)
- Return completed form and documentation to the Lander Elementary School office in an envelope marked **“PTG – Brittany Smerke”**
- Checks will be processed at the monthly PTG meetings.
- If you have questions please contact Brittany Smerke at 440-384-5828 or at [brittanysmerke@gmail.com](mailto:brittanysmerke@gmail.com).

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(For Use By Treasurer Only)

Date Received: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Debit Card User: \_\_\_\_\_ Check No.: \_\_\_\_\_