



Reimbursement Form

2021/2022

13771 N. Fountain Hills Blvd.
 Suite 114
 Fountain Hills, AZ 85268
 www.fhusdpto.org
 email: info@fhusdpto.org

Date	Description	Event/Purpose	Vendor	Price
			TOTAL	

Print Name: _____

PTO Approval:	
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Signature: _____

Check #:	
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School: _____

Date:	
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Reimburse me via check or PayPal: _____

Email or Phone for PayPal: _____

****Receipts Must Be Attached****