

PHS VPO Reimbursement Form

Sport or Club: _____ Date Submitted: _____

Purpose or Label: _____

Specific Items: _____

Amount \$: _____ Purchase Date: _____

Person Being Reimbursed: _____

Mailing Address: _____

Notes: _____

Include purchase receipts with this form, submitted by:

Email to - treasurer@peninsulaproud.com

Drop off - VPO Box in office at Peninsula High School

Mail to - Attn: VPO Treasurer 14105 Purdy Dr. NW. Gig Harbor, WA 98332

For Treasurer Use:

Date Paid: _____

Amount \$: _____

Check #: _____

Entered in Ledger: _____