



The Village School Parent Association

Reimbursement Form

Date: _____

Claimant (Name, Position): _____

| Name of Supplier | Goods or Service Description | Amount | Budget Category, Event , or Funding Request # |
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| | TOTAL | | |

Reviewed by: _____ on _____
(Program/Event Lead) (MM/DD/YYYY)

Approved by: _____ on _____
(VSPA President) (MM/DD/YYYY)

Instructions:

- Claimant completes Reimbursement Form, attaching all supporting receipts;
- Claimant submits Form and receipts to Program/Event Lead, retaining a copy for themselves;
- Program/Event Lead approves claim, specifies Budget Category(ies), and scans/saves copy of Form;
- Program/Event Lead gives approved Form and receipts to School Accountant; and,
- Program/Event Lead emails confirmation to School Accountant, attaching scanned Form, and copying VSPA Treasurer; and,
- School Accountant pays claimant.