

**Herndon Middle School PTA
Request for Reimbursement**

Date: _____
Make check payable to: _____
For how much: \$ _____
For what specific items: _____
Budget category to be charged: _____

**Please attach invoice or receipts.
Mail completed form with receipts to:**

**Diana Fields
HMS PTA Treasurer
c/o Herndon Middle School
901 Locust Street
Herndon, VA 20170**

Signature of Committee Chair, Team Leader or PTA Officer:



For Treasurer's use:

Paid date: _____ Check #: _____ Posted: _____