



PTHS SOCCER BOOSTERS EXPENSE REIMBURSEMENT

Complete this form, upload your receipts, and email the completed form to:

GIRLS – Treasurer@pthssoccer.net BOYS – AsstTreasurer@pthssoccer.net

Date

Check payable to

Address

City / State / Zip

EXPENSE DESCRIPTION

AMOUNT

\$

\$

\$

\$

total

\$

I confirm that the above information is accurate

Printed name serves as signature

FOR TREASURER USE

Check # _____

Amount \$ _____

Date Paid _____

Account _____

Signature _____