

Reimbursement Form

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:			
Signature:		Check #:			
School:		Date:			
Reimburse me via check or PayPal:					
Email or Phone for PayPal:					

Receipts Must Be Attached