

Staff Support Fund Reimbursement Form

Teacher Name: _____ Full Time / Part Time (Circle One)

Send Reimbursement Check to: _____
 (Home Address or "Staff Mailbox")

Price & Item Description	Quantity	Total \$

Grand Total _____

Eligibility: For purchases of classroom supplies, student supplies, or items and equipment that enable staff to efficiently perform their duties at East Ridge Elementary. **Full Time Staff are eligible for reimbursement of up to \$350.00. Part Time Staff are eligible for reimbursement of up to \$250.00**

Instructions: Purchase items with your personal funds, then staple or tape original receipts to the back of this form. Turn this form into the PTA mailbox and the treasurer will send you a check within two weeks. Contact the PTA Treasurer (treasurer@erpta.org) if a faster turn around time is necessary

For Treasurer Use Only: Date: _____ **Check #:** _____ **Amount: \$** _____