

Colfax PTO

Expense Report

Name			Today's Date
Address			Phone
City	State	ZIP	
email			
Business Purpose			

Tip: Include

- WHO made this purchase (if not yourself)
- WHAT, a description of what was purchased
- WHEN, dates the purchase was made and/or used
- WHY, what was the purchase for

E.g.: Dr. Woods ordered Dinner for the welcome back teacher cook-in on 19/Aug/2019

Is this a:

- ☐ REIMBURSEMENT REQUEST - send check to my address, above
- ☐ CHECK REQUEST - send check directly to vendor, below
- or -
- ☐ PAYMENT RECORD - e.g., debit card, electronic funds transfer or online bill payment

Vendor Name			Invoice Number
Address			Date of Transaction*
City	State	ZIP	
Vendor Phone #			
Check/Transaction Amount			

* Electronic transactions only

Signature	Date
-----------	------