

**MARKHAM PTA
165 CRESCENT DRIVE
PITTSBURGH, PA 15228**

MISSING RECEIPT FORM

This form is to be completed when a receipt is lost or unobtainable.

Expense Details:

Date of Purchase: _____

Place of Purchase: _____

Amount of Purchase: _____

Description of Purchase: _____

Reason for Purchase: _____

Reimbursement Check Payable To:

Signature of Requestor & Date:

Completed by Treasurer:

Check #: _____ Date Paid : _____

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