

Saints Peter and Paul School - West Chester, PA  
Spring Fundraiser Expense/Reimbursements Tracking



Today's Date: \_\_\_\_\_  
 Full Name: \_\_\_\_\_  
 Committee: \_\_\_\_\_  
 Committee Chair: \_\_\_\_\_

Itemized Expenses:

Vendor/Store Name	Receipt/Invoice Date	Receipt/Invoice Number	Description	\$ Expense
			<b>Total</b>	\$ -
			<b>Less Cash Advance (if any)</b>	\$ -
			<b>Total Due</b>	\$ -

Signature: \_\_\_\_\_  
 Please make check payable to: \_\_\_\_\_

**Instructions to complete this form:**  
 Please obtain approval from the committee chair prior to incurring all expenses.  
 Please complete form in its entirety and print.  
 Attach an original (preferred) or copy of all receipts/invoices.  
 Please sign and indicate name to go on reimbursement check.  
 Send completed form and receipts in an envelope to SSPP School office, att: Keith Aleardi, H.S.A. Treasurer  
 You will be notified when reimbursement check is sent into school office.

*Thank you for all you do for Saints Peter and Paul School.*