Reimbursement Form

Fill out the form below completely. All receipts should be attached to the form and emailed to Santa.Carl.Atlanta@gmail.com.

Date _____

Budget Category _____

Approver Name _____

Submitted by _____

Phone _____

Email _____

Send Check to (name) _____

Address _____

City/State/Zip _____

Description of Purchase	Amount
Total	

Treasurer Use Only

Check Number _____ Amount _____ Date _____

Budget Category _____

Peachtree Santas of Georgia, Inc.
Carl White, Treasurer
3905 Brookline Drive
Alpharetta, GA 30022-6436