

## Newton South PTSO Reimbursement Form

Date: \_\_\_\_\_  
Requested by: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Committee: **South Stage Parents Group**  
Reimbursement to: \_\_\_\_\_  
Mail check to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Expense Details

(receipt(s) must be included to be processed)

Date	Paid to	Description	Amount

**Total:**  
\_\_\_\_\_

**Please email PDF of completed reimbursement form and receipts to  
South Stage Parents Group treasurer at:**

[SouthStageTreasurer@gmail.com](mailto:SouthStageTreasurer@gmail.com)

**OR, mail this completed reimbursement form and original receipts to:**

Ray Lewis  
South Stage Treasurer  
17 Norman Road  
Newton, MA 02461