



Walt Whitman High School PTSA  
7100 Whittier Blvd., Bethesda, MD 20817

**CHECK REQUEST/EXPENSE REIMBURSEMENT FORM**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone Number: Daytime: \_\_\_\_\_ Evening: \_\_\_\_\_

Amount of Reimbursement/Invoice: \_\_\_\_\_

Description of Item(s) Purchased: \_\_\_\_\_

Committee to be Charged: \_\_\_\_\_

Date Check is Required: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

Signature: \_\_\_\_\_

Please attach all receipts/forms related to this expense and forward to the Treasurer's envelope in the PTSA mailbox at school or mail to:

Marta Lederer, PTSA Treasurer  
7712 River Falls Dr., Potomac, MD 20854

Check #	
Amount	
Date	

You are also welcome to contact [wwhsPTSAtreasurer@gmail.com](mailto:wwhsPTSAtreasurer@gmail.com) with any questions.