

**BHS PTSA Reimbursement & Payment Authorization Form**  
(Form not to be used for Grant Awards)

Please complete this form and attach *all* receipts and invoices.

Please fill out **every line** below, so I can get all expenses into the right categories and reimburse you in a timely fashion.

Please email to Jeff Cody at [codyjm@comcast.net](mailto:codyjm@comcast.net)

Any questions please call me or e-mail me: 206-579-0058

Amount: \_\_\_\_\_

Pay to: \_\_\_\_\_

Payee Mailing Address: \_\_\_\_\_

Today's Date: \_\_\_\_\_ For Committee or Event: \_\_\_\_\_

Explanation of what money was used for or additional comments:

\_\_\_\_\_  
\_\_\_\_\_

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

Your Phone: \_\_\_\_\_

Your Signature:

\_\_\_\_\_

Committee Chair Signature:

\_\_\_\_\_