



Environmental Charter School at Frick Park
PCO Reimbursement Request

Date: _____

Name: _____

Address: _____

Phone: _____

Email: _____

PO# _____

Event Name: _____

Other or Mini Grant Name: _____

	<u>Vendor (Please Attach Receipts)</u>	<u>Description of Purchase</u>	<u>Amount</u>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
			Total: <u>0</u>

Approved for Payment:

Date: _____

Check# _____

Reimbursement of funds will be mailed to address listed above and can take up to 30 days.