## **OLYMPUS PTC REIMBURSEMENT REQUEST**

## PLEASE NOTE:

-All PTC related expenses must be made as a separate purchase and be on an actual receipt, bill, or invoice. Personal items included on receipts will result in the request being denied unless an itemized receipt is obtained from the retailer by the

person submitting the request.
-Printouts from company programs that only show an amount spent, but no itemization, will also be denied. -You will not be reimbursed for the cost of gift cards unless the gift card has an approved use, such as a gift for an event, or you can provide the receipt for the PTC related expenses paid for by use of the gift card as well as the receipt for purchasing the gift card.
Please do not lose your receipts!

DATE OF REQUES	T:	
PERSON SUBMITT	ING REQUEST:	
Pick up check Mail to ADDR	at OLYMPUS OFFICE IN P	TC BOX
TOTAL AMOUNT R	EQUESTED (INC. TAX AND	SHIPPING):
DESCRIPTION OF I	ITEM(S):	
PROCEDURES TO	BE FOLLOWED:	
back of the form. Ple	ease keep a copy for your rec	and staple original receipts/bills/invoices to the ords.  ail to olympus.ptc@gmail.com - Attn -
PTC APPROVAL: T	wo signatures required.	
Treasurer Signature	-	
Pres. or Vice Pres. S	Signature	
Ck Number	Amount	Date