

**Darien High School Parents Association**  
**2022-2023**  
**REIMBURSEMENT REQUEST**

Date \_\_\_\_\_

DHSPA Committee \_\_\_\_\_

Check Payee \_\_\_\_\_ Check Amount \$ \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Mailing Address \_\_\_\_\_

Detailed Description of Expense \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Please remember to attach receipts.***

*Checks will be mailed to the address listed above unless other arrangements have been made with the Treasurer. Reimbursements cannot be made without receipts unless an arrangement has been made with the Treasurer.*

Mail or email form with receipts to: Liz Houchin  
DHSPA Treasurer  
45 Salisbury Road  
Darien, CT 06820

lizzie.houchin@gmail.com