



PTO

Funds Request Form

- Complete form and attach supporting documents (original receipts, invoices, emails, etc.)
- Forward to the PTO Treasurer via email, trish12279@yahoo.com or place in the PTO box in the mailroom.
- Allow additional time for checks over \$150, which require member or board approval.
- Allow up to **5 business days** for checks requiring PTO Officer/Board approval.

Submitted By: _____		Date Submitted: _____	
Email and/or Phone Number: _____		Grade: (if teacher requesting)	
Total Amount Requested: _____		Date Funds Are Needed By: _____	
<p>Type of Request:</p> <p><input type="checkbox"/> Advance Funds (rarely used)</p> <p><input type="checkbox"/> Reimbursement</p> <p><input type="checkbox"/> Payment to Vendor</p>	<p>If this funding request is for a field trip complete the following:</p> <p>Destination: _____</p> <p>Admission cost per student: \$ _____</p> <p>Number of Students: x _____</p> <p>Admission Cost = _____</p> <p>-Student/Parent payment -(_____)</p> <p>Total Admission Costs \$ _____</p> <p>Total transportation costs: + _____</p> <p>Other costs: (description) + _____</p> <p>_____</p> <p>TOTAL COSTS = \$ _____</p>		
<p>Who will benefit from this request:</p> <p><input type="checkbox"/> Both Elementary and Middle School</p> <p><input type="checkbox"/> Entire <i>Elementary</i></p> <p><input type="checkbox"/> Entire <i>Middle School</i></p> <p><input type="checkbox"/> Your Class Only</p> <p><input type="checkbox"/> Other: _____</p>			
<p>Purpose of funds requested/description of need for funds:</p> <p>_____</p> <p>_____</p>			
<p>Check Payable to: _____</p>			
<p>Full Address: (if check needs to be mailed) _____</p>			
<p>For PTO use ONLY:</p> <p>Date Reviewed: _____ Included in Annual Budget? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Request Approved <input type="checkbox"/> Request Denied (see below) <input type="checkbox"/> Request Approved with Modifications (see below)</p> <p>Modifications/Reasons: _____</p> <p>_____</p> <p>PTO President: _____ PTO Officer: _____</p> <p style="text-align: center; margin-left: 50px;">Tina Cocio</p>			
Expense Category: _____		Check #: _____	