

REIMBURSEMENT REQUEST

Requestor: Category/Committee: Date:

Amount: \$ *Place an "X" in one box* Included in Annual Budget or Approved at Meeting __/__/__

Reason for Reimbursement:
(All relevant receipts must be tallied and attached to this form)

Signature of Requestor:

CHECK/CASH REQUEST

Requestor: Category/Committee: Date:

Amount: \$ *Place an "X" in one box* Included in Annual Budget or Approved at Meeting __/__/__

Payable To:

Reason for Check:
(If this is a bill that needs to be paid, attach the bill to this form and the Treasurer will mail it)

Signature of Requestor:

Approved by Committee Chair: Date:
Approved by PTO Treasurer: Date: Check #:
Approved by PTO President: Date: