

## **PTO Check Request / Reimbursement Form**

| **Event**: |  |
| --- | --- |
| **Date**: |   |
| **Filed By**: |   |
| **Payable To**: |   |
| **Contact # or Address:** |   |

# **Receipt Recap**

# \*\*Please attach receipts to this form\*\*

| **Purchased From**  |  **Items Purchased**  | **Amount** |
| --- | --- | --- |
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|  |  |  |
|  |  |  |
| **Total** |  |

Please email all reimbursement requests to the PTO Treasurer (mary.ruckart@gmail.com)

(Filled out by PTO Treasurer)

**Check #:**  **Approved By:**