

# DISTRICT 75 PTO CHECK REQUEST FORM



Any committee member may submit a request for reimbursement when money has been spent on activities that have been included in the year's PTO budget. ~ Complete the form, attach the receipts or invoice and put in the PTO Treasurer's box. ~All reimbursement checks require 2 signatures—checks will be written on a **weekly** basis & you will be notified for pick up or you will find your check in the PTO mail box at the school, unless you make other arrangements with the Treasurer **Vickie Czapla**. If the check needs to be made to a third party please leave detailed instructions. ~Keep in mind we are tax exempt on many purchases and you may ask for a form!! ~**All requests must be submitted no later than May 31,2017!!**

## REQUEST DETAILS

Date Submitted: \_\_\_\_\_  
 Submitted by: \_\_\_\_\_  
 Committee: \_\_\_\_\_  
 Event: \_\_\_\_\_

Items/Services Purchased \_\_\_\_\_  
 \_\_\_\_\_

Included in budget and approved by committee chair? YES \_\_\_\_\_ NO \_\_\_\_\_  
 Receipts/Invoices attached? YES \_\_\_\_\_ NO \_\_\_\_\_  
 Phone # or email for questions: \_\_\_\_\_

## CHECK DETAILS

1.	Name	_____
	Dollar Amount	\$ _____
2.	Name	_____
	Dollar Amount	\$ _____
3.	Name	_____
	Dollar Amount	\$ _____
4.	Name	_____
	Dollar Amount	\$ _____

Special Instructions: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## TREASURER USE ONLY

Check Number \_\_\_\_\_ Date Paid \_\_\_\_\_  
 Category \_\_\_\_\_

If not budgeted, approved by: \_\_\_\_\_

