PTO Funds Pre-Approval and Reimbursement Form

Please complete this form and s	ubmit to the PTO President or Treasurer.	
Amount Requested (Up to):	Date:	
Reason for the Request:		
Subcommittee:		
PTO Approval Signature:		
	each retailer (Amazon, Walmart, etc.), general or, food, etc.), and the total amount being submitt receipt separately.	•
Place of Purchase	Description	Amount
	Total:	
Payable to:		
Address:		
Phone Number:		
for PTO Financial Review and tax-re	ase orders, and bills to the back of this form. Receipporting purposes. Payments will not be made without Treasurer. Reimbursement will be made within 2 week.	it receipts.
Treasurer Note		
Payment Date:		
Check #:		
Payment Amount:		