

CHECK REQUEST

NABNASSET PTO

Please scan and email this form along with corresponding receipts or invoices to

Rachel Galpin for reimbursement: rachelanngalpin@gmail.com

☐ **YES! My PTO Board is aware of this request.**

Requestor Name: _____

Email (if unknown to treasurer) _____

Amount Requested: _____ Date of Request: _____ Date Needed: _____

- ☐ Payment of Invoice (*please include copy of invoice*)
☐ Expense Reimbursement (*please include copy receipts*)
☐ Other

Please check the appropriate budget category and provide a brief description of how funds will be used.

- ☐ Fundraiser (provide name of fundraiser)
☐ Enrichment Program AEP (provide name of program)
☐ Appreciation (provide name of/describe appreciation event)
☐ Community Building (provide name of/describe event)
☐ PTO Operations (provide explanation)
☐ Principal Funds (provide explanation)
☐ I am unsure how to classify (provide brief description)

Funds will be used for: _____

Check Payable To: _____

☐ **Mailing Address:**

☐ **Leave Check in PTO Crate in School Office**

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Please allow up to 10 days to process the check request. Inform treasurer if immediate action is required.