

**Crocker Elementary PTO  
Request for Check Reimbursement or Issuance**

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Check Payable To:

Address:

Amount requested:

Purpose for payment:

Date that check is needed by:

- Please mail to address listed above
- Return to Requestor
- Other (specify): \_\_\_\_\_

Submitted by: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Please attach original receipt to the back of this form.**

**Instructions:**

1. Complete this form for all PTO expenditures.
2. All expenditures must be approved by the appropriate committee Chair and budgeted.
3. Receipts/Invoices:
  - A. If you are requesting a check for reimbursement of money you have spent, attach the original receipts.
  - B. If the check will be used to purchase merchandise, put the receipt/invoice in the PTO's mailbox after the merchandise has been received.
  - C. Please keep copies of all receipts in case the originals are misplaced.
4. Place the completed form in the PTO's mailbox.

Any questions, please call Terri Hogan (681-4106) or Keith Pooch (480-3021).

**Note:** Please request checks at least 1 week prior to "need by" date.

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**For Treasurer's Use Only:**

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Budget Category: \_\_\_\_\_

Check Date: \_\_\_\_\_

Check Number: \_\_\_\_\_

Approval: \_\_\_\_\_

Amount Paid: \_\_\_\_\_