

# Debit Card Record

## Eisenhower Intermediate School PTO

Your Name	Phone:
Project/Category:	
Date Submitted:	Date Purchased:
Reason for Charge:	
<input type="checkbox"/> Included in Annual Budget      or <input type="checkbox"/> Approved at Meeting	
Amount Charges: \$	
Name of Vendor:	

Note Additional Explanation:

For Treasurer's Use Only: Category \_\_\_\_\_ Dated \_\_\_\_\_ logged \_\_\_\_\_

