

Check / Reimbursement Request
Bulldog Best PTO

The receipt(s), bill, quote, or statement for the total amount MUST be attached
or a check will NOT be issued.

Date Submitted: _____

Your Name: _____ Phone: _____

Email: _____

Check Payable to: _____

Amount: \$_____ Project / Committee: _____

Description of expenditure: _____

Have you attached the receipt(s), bill, quote, or statement? Yes No

If this is for a grant request, a copy of your grant request MUST be attached before a check will be issued. Is your grant request attached? Yes No

How should the check be delivered?

Address to drop in mailbox: _____

Back Pack Mail _____
Child's Name *Teacher* *Grade*

Leave in the SA School Office for Me to Pickup

For Treasurer's Use Only

Included in annual budget **or** Grant Request # _____

1st PTO Officer Approval: _____

2nd PTO Officer Approval (if over \$1500): _____

Category: _____ Check # _____ Date: _____ Mailed: _____

Entered