

# LAKE POINTE ELEMENTARY PTO CHECK REQUEST FORM

**Directions:** Use this form if you are requesting reimbursement for expenses <\$50 OR an expense previously approved by PTO board and general membership. Receipt(s) should be attached to this form.

**Date:**   
mm/dd/yy

**Funding Approval #**  
(if >= \$50 or part of a previously approved funding request) **OR**

**Board Member Signature**  
(if under \$50)

**Requestor:**

Name

Address

Telephone / email address

	Item Description	*PTO Line Item	Amount
<b>Items:</b>			
<b>Total \$</b>			

\*If you are not sure what the PTO budget line item is for this purchase, please contact the PTO Treasurer. Also, if your invoice reflects more than one budget line item, please identify each category and the amount that should be applied to each.

**Payment:** Payee for Check   
(Payee is the supplier or person to whom the check should be written)

Date Paid

Amount

Check #

Receipt Received

*For Spanish Expenses Only:*

Classroom volunteer reimbursement

Teacher: \_\_\_\_\_

Grade Level: \_\_\_\_\_