

# GWS PTO

## Payment Reimbursement /Check Request Form

Date \_\_\_\_\_

Name \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

PTO Budget Category, please break down expenses by category, and attach all receipts.  
Please note, for IRS/tax purposes, receipts are needed for all reimbursements.

	Category	Amount		Category	Amount
<input type="checkbox"/>	5th Grade Committee	\$ _____	<input type="checkbox"/>	Jog-A-Thon	\$ _____
<input type="checkbox"/>	Bank Charges	\$ _____	<input type="checkbox"/>	Pizza Game Night	\$ _____
<input type="checkbox"/>	NPN Membership	\$ _____	<input type="checkbox"/>	Playground	\$ _____
<input type="checkbox"/>	Book Club	\$ _____	<input type="checkbox"/>	PTO Welcome Folder	\$ _____
<input type="checkbox"/>	Box Tops & Labels	\$ _____	<input type="checkbox"/>	Student Art Program	\$ _____
<input type="checkbox"/>	Library Books	\$ _____	<input type="checkbox"/>	Beautification	\$ _____
<input type="checkbox"/>	Enrichment	\$ _____	<input type="checkbox"/>	Family Directory	\$ _____
<input type="checkbox"/>	Hat Day	\$ _____	<input type="checkbox"/>	Spirit wear	\$ _____
<input type="checkbox"/>	Holiday Festival	\$ _____	<input type="checkbox"/>	Teacher Appreciation	\$ _____
<input type="checkbox"/>	Insurance	\$ _____	<input type="checkbox"/>	Teacher Reimburs't	\$ _____
<input type="checkbox"/>	Donations/Gifts	\$ _____	<input type="checkbox"/>	Membership Drive	\$ _____
<input type="checkbox"/>	Office Supplies	\$ _____	<input type="checkbox"/>	Newsletter	\$ _____
<input type="checkbox"/>	Equipment/ Capital Exp.	\$ _____	<input type="checkbox"/>	Back Pack flyers	\$ _____
<input type="checkbox"/>	Bake Sales	\$ _____	<input type="checkbox"/>	Other-	\$ _____
<input type="checkbox"/>	Rock n Bowl	\$ _____	<input type="checkbox"/>	Other-	\$ _____

Total Amount Requested \$ \_\_\_\_\_

Invoice attached     Receipt attached

**Check Payable To:**

Name of Person/Company

\_\_\_\_\_

**Approved by:**

\_\_\_\_\_

President's or Treasurer Signature

**GWS PTO Check Number:** \_\_\_\_\_