

# ELLICOTT ELEMENTARY – PTO

## DISBURSEMENT REQUEST FORM

(Please complete one form for each payee)

**Requested by (print):** \_\_\_\_\_

**Please check your relationship to PTO:**

Chairperson  Teacher  Board Member

Other (please state) \_\_\_\_\_

\*\*Chairperson approval must be obtained for any submissions in that budgeted area before disbursement will be granted.

**Make check payable to (payee):** \_\_\_\_\_

**Check Amount:** \_\_\_\_\_

**Special Instructions / Delivery method (child's classroom, payment address etc):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Budget Area	Date of expense	Description of Expenditure	\$\$ Amount
		Total Expenditure :	

**Instructions:**

1. Complete one form for each payee
2. Attach copies of receipts for each expenditure \*\*\*You must have a receipt\*\*
3. Forward to PTO Treasurer for payment

<b>PTO Use only</b> Check # _____ Date: _____
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