

- Check Request/Cash Advance** (Please submit request at least three days in advance)
- Mini-Grant Request** (Allow at least three days for processing)
- Reimbursement Request** (Allow at least three days for processing)
- Gallup Hill PTO**

Your Name:	Phone:
Project/Expense Category: (Example: PTO expense, Sponsored Event, Teacher Mini-grant)	
Date Submitted: (mm/dd/yr)	Payment Needed by: (mm/dd/yr)
Reason for Check/Mini-Grant/Reimbursement:	<input type="checkbox"/> Mail Check or <input type="checkbox"/> Return Check to:
<input type="checkbox"/> Included in Annual Budget	or <input type="checkbox"/> Approved at PTO Meeting On: (mm/dd/yr)
Check Payable To:	Amount: \$
Payee Full Address: (If Treasurer is mailing payment/reimbursement)	
Signature: (Of person requesting check or reimbursement)	

Reimbursement Request: Attach Receipt(s) totalling the amount of reimbursement. If requested check is for items from more than one budget category, please subtotal per category. (Ex: \$40 Reimbursement Request = \$20 PTO supplies + \$20 for Holiday Night)

Mini-Grant Request: Attach Receipt(s) and PTO will reimburse up to the mini-grant maximum. Please note if multiple teachers are combining mini-grants. (Mini-grants are in the budget.)

Check Request: Attach the bill to the form . If the check is for a cash advance or to pay for a delivery, the billing and/or receipts must be forwarded to the Treasurer upon receipt along with the return of any unused cash from cash advance.

-Treasurer must receive receipts or billings for all payments made from PTO account-

Approved By (PTO Officer):	Date:
Approved By (PTO Officer): <i>Second signature required for checks over \$1000.</i>	Date:

Treasurer's Use Only: Category: _____ Check# _____ Date: _____