NorthStar ACADEMY

PTO CHECK REQUEST FORM

Date: _____   Amount: $ _____   Receipt Attached ☐

Event:_____

Expense Description: _____

Budget Category: _____

_____   _____
Signature requesting reimbursement   *Pay to:*

                                            _____
_____   *Address*
President Approval
                                            _____
                                            City   *Zip Code*

_____   **Paid by Check No. _____**
Treasurer

IN ORDER TO BE REIMBURSED PLEASE FOLLOW INSTRUCTIONS
1. Pre-approval must be given by PTO President
2. Fill out form and attach receipts to Check Request form
3. Turn in check request from to PTO President