

Elm School PTO Requisition for Payment

- Please complete this form in full. Incomplete forms will be returned to the Treasurer's Docket for completion. Questions? Email the Treasurer at elmpptotreasurer@gmail.com.
- If you are reimbursed via online bill pay service, note that you have a limited time in which to deposit your check (usually 60 days). **The PTO will not be liable for any fees incurred if you fail to deposit your check during the appropriate window.**

Request date: _____

Contract or invoice due by (date): _____

Request by (name): _____

Email: _____

Phone: _____

Reason for payment (invoice, purchase order, contract, and/or itemized receipt[s] totaling amount of the reimbursement must be attached—if there is no receipt, please provide detailed letter for consideration):

Requested amount: \$ _____

Make check payable to: _____

Mail to (street address): _____

City: _____ State: _____ Zip: _____

This section to be completed by the PTO Treasurer.

- Included in annual budget
- Approved at meeting (date: _____)

Bank: Hinsdale Chase

Type: Debit Card Check # _____ Online bill pay conf. # _____

Date: _____

Amount verified or adjusted: _____