



# Lowry Elementary PTO Reimbursement/Check Request Form

*For items already approved in the budget*

## Personal Information

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

## Account Information

Amount of Check: \_\_\_\_\_

Check Payable to: \_\_\_\_\_

Address: \_\_\_\_\_

*(if PTO needs to mail the check)* \_\_\_\_\_

Project/Committee: \_\_\_\_\_

Specific Description of Payment: \_\_\_\_\_

## PTO Approval

*Do not write below this line - PTO use only*

Approved by (PTO Officer) \_\_\_\_\_ Date \_\_\_\_\_

Received by Treasurer *(signature)* \_\_\_\_\_ Date \_\_\_\_\_

Check Number: \_\_\_\_\_ Date of Check: \_\_\_\_\_