

Nitrauer PTO Check Request

Date _____

Name and Signature of Person Requesting: _____
(print name) (signature)

Telephone: _____ Email Address: _____

PTO Activity: _____ Description of Expense: _____

Check Payable to: _____

How would you like to receive the check?

_____ Mail (Address: _____)

_____ Send Check Home with Student

(Name of Student: _____ Grade: _____ Teacher: _____)

_____ Pick up Check in Office

Total Amount Requested: _____ **Executive Team Approval:** _____

Check #: _____ Date Paid: _____ Charge to Account: _____

When requesting reimbursement from the PTO, please include all receipts. The completed check request form and required receipts may be emailed to Alex Massie, PTO Treasurer, at nitrauerptotreasurer@gmail.com or sent to the office with your student. Please allow 7-10 days for processing.

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