



HOFFMAN TRAILS PTO - REIMBURSEMENT / CHECK REQUEST

Attach all original receipts and place completed form in the PTO mailbox.
Please allow 3-5 school days for your check to be processed.

Date Submitted: / /	Total Amount Due: \$
Name:	
Email:	
Account Category:	
Description of Expenses:	
<input type="checkbox"/> Included in Annual Budget OR <input type="checkbox"/> Approved at Meeting on / /	

Check Payable To:
Check Delivery Instructions: <input type="checkbox"/> Payee Mailbox <input type="checkbox"/> PTO Mailbox for Pick-up <input type="checkbox"/> Mail
Address:

Approved by (PTO Officer): _____ Date: / /

Approved by (PTO Officer): _____ Date: / /

FOR TREASURER'S USE ONLY

Date: / /	Check #:	Amount Paid: \$
Account / Budget Line:		
Check Delivery Method: <input type="checkbox"/> Payee Mailbox <input type="checkbox"/> PTO Mailbox for Pick-up <input type="checkbox"/> Mail		