

Cherry Creek Academy PTO  
Request for Funds / Reimbursement Form

Directions:

- Fill in all information. (Incomplete forms will cause delay in processing)
- Attach invoice or all receipts.
- Place in PTO President's box in front office.

Date Submitted: \_\_\_\_\_ Check Needed By: \_\_\_\_\_

Activity, Fund or Budget Description: \_\_\_\_\_

Requested By: \_\_\_\_\_ Position: \_\_\_\_\_

Phone : \_\_\_\_\_ E-Mail: \_\_\_\_\_

Description and Purpose:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DETAIL

Item:	Cost:
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Amount Requested: \_\_\_\_\_

Check Payable To: \_\_\_\_\_

Deliver To/Address: \_\_\_\_\_

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To be Completed By Treasurer/President

Check Number/Amt/Date:\_\_\_\_\_

Approved by PTO President: \_\_\_\_\_ Date \_\_\_\_\_