



Voss PTO

Check Request/Reimbursement Form

PTO Board Members Use Only	
Date Paid:	PTO Check #:
Date Distributed:	Circle One: Delivered or Mailed

Date of Request:							
Make Check Payable to:	Address (for mail delivery):						
Circle One:	_____						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; padding: 5px;">Deliver To</td> <td style="width: 50%; text-align: center; padding: 5px;">Mail To Payee</td> </tr> <tr> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">Provide address</td> </tr> <tr> <td></td> <td style="text-align: center; padding: 5px;">—————→</td> </tr> </table>	Deliver To	Mail To Payee	_____	Provide address		—————→	_____
Deliver To	Mail To Payee						
_____	Provide address						
	—————→						
Requested by:	Approved by:						

Date:	Items/Services Purchased:	Committee/Expense to:	Amount:
GRAND TOTAL			\$