

SJPTO Expense Request for Reimbursement or Funds

Complete this form and turn in to the Principal for approval. Principal will forward to the SJPTO President and Treasurer. PLEASE FILL OUT THE INFORMATION BELOW AND TO THE RIGHT. ATTACH RECEIPTS WHEN INDICATED.		Budget Item	Amount To Be Reimbursed	Amount For Purchase
1 Name: _____ Date: _____		Student Treats		
		St. Nick		
2 I am: (select one) ___ Faculty (Grade/Specialty): _____ ___ Staff (Position): _____ ___ Parent		Easter		
		Annual Fundraiser		
3 Request is for: ___ Reimbursement item <i>already purchased</i> ___ Funds for Purchase item <i>not yet purchased</i> Write amounts in the red column to the left. Write amounts in the green column to the left. Total \$ _____ Total \$ _____		Expenses		
		Parent Ed. & Programs		
Reimbursement check payable to: _____ Purchase check payable to: _____ Attach highlighted receipts on the back of this form Attach invoices or billing statements on the back of this form if available		Speaker		
		Program for Students		
4 Hand in completed form along with any receipts or invoices attached on the back to the principal through the weekly family packet, or drop at the Parish Center		Hospitality/Outreach		
		PTO Hospitality		
FOR OFFICE USE: APPROVED BY (Mark/Date Below as Approved)		Christmas Concert		
		Spring Concert		
Principal: ___Y___N Date: _____ SJPTO President: ___Y___N Date: _____ SJPTO Treasurer: ___Y___N Date: _____		May Crowning		
		Last Day of School		
PAYMENT INFORMATION: Reimbursement Payment: Ck #: _____ Date: _____ Purchase Payment: Ck #: _____ Date: _____		Staff Appreciation		
		Fall Conferences		
After treasurer writes check, make 2 copies. Keep one, send one to principal. Checks to parents are sent via the Family Packet. Checks to staff are put in their office mailbox.		Spring Conferences		
		Teacher/Staff App Week		
Updated 8.24.2021		Christmas Staff Fund		
		Admin Day Gift		
TOTAL: _____ TOTAL: _____		Principal Day Gift		
		Misc. Gifts		
School Expenses		Staff Birthdays (Scrip)		
		Family Social Events		
Service Project		Events		
		Classroom Needs		
Classroom Needs		3K Preschool		
		4K		
Phys. Ed.		Kindergarten		
		1 st Grade		
Kindergarten		2 nd Grade		
		3 rd Grade		
1 st Grade		4 th Grade		
		5 th Grade		
2 nd Grade		Principal		
		Art		
3 rd Grade		Library/Media		
		Music		
4 th Grade		Resource/Specialist		
		Grant		
5 th Grade		School Expenses		
		Spelling Bee		
Principal		Baccalaureate		
		Science Olympiad		
Art		Field Trips/Transport		
		Walk For Virtues		
Library/Media		Catholic Schools Week		
		Covid-19		
Music		Other (describe):		

- 1. Fill out the reverse side of this form, and list amount(s) requested for REIMBURSEMENT in the red column by the appropriate budget item*
- 2. Attach receipt(s) in this box, highlighting item(s) if necessary*

- 1. Fill out the reverse side of this form, and list amount(s) requested for PURCHASE in the green column by the appropriate budget item*
- 2. Attach any purchase orders or invoices*