

NATIVITY PTO FUNDS REQUISITION FORM 2009-2010

Request Date: _____

Payment Type:	<input type="checkbox"/> Reimbursement: Attach original receipts <input type="checkbox"/> Purchase/Vendor: Attach invoice <input type="checkbox"/> Petty Cash: Provide denomination breakdown on the next page/back side <input type="checkbox"/> Other Explain:
----------------------	---

Requested by: _____

Phone: _____

Email: _____

Check Delivery by:	<input type="checkbox"/> Mail to Vendor <input type="checkbox"/> Mail to Requestor <input type="checkbox"/> Back Pack <input type="checkbox"/> PTO Box <i>Call _____ when ready for pick-up</i>
---------------------------	--

Committee: _____

Description:	Code:		Amount:	
	Code:		Amount:	
	Code:		Amount:	

Payment Amount: _____

Check Payable to: _____

Address: _____

City State Zip: _____

Account /PO#: _____

Special Considerations (e.g., check due date) :
--

Approval

Committee Coordinator		Date:	
PTO President/Treasurer		Date:	
Principal:		Date:	
Pastor:		Date:	
Completed Date:			
Check Number:			

Note: Committee Coordinator, PTO President/Treasurer, Principle and Pastor must approve all expenses prior to reimbursement (petty cash is an exception). Please allow 5-7days for processing, in order to obtain all signatures required for approval.

Oct 2009

Petty Cash – Denominations

Denomination	Amount	Sub-Total
Singles	x	\$
5's	x	\$
10's	x	\$
20's	x	\$
Quarters	x	\$
Dime	x	\$
Nickels	x	\$
Pennies	x	\$
	Total	\$