

Roosevelt PTO  
Check Request/Reimbursement Request Form

Date:

Event or Activity:

Committee Supporting Event or Activity:

Reason for Expenditure:

Requestor of check/reimbursement:

Telephone:

Email address:

**Check Information**

Payee Name:

Amount:

Mailing Address:

Phone Number:

**Please scan all associated receipts, contracts, or invoices along with this form and email them to: [BulldogsPTOTreasurer@gmail.com](mailto:BulldogsPTOTreasurer@gmail.com) or place hard copies in the PTO folder in the RMS main office.**

Please direct any questions to the Treasurer:

Carrie Ryan  
[BulldogsPTOTreasurer@gmail.com](mailto:BulldogsPTOTreasurer@gmail.com)