

# JESSUP ELEMENTARY SCHOOL PTA FUNDS REQUEST FORM

Please provide the following information in consideration for PTA funds to support or reimbursement for a project. Place in PTA Box.

☐ Funds requested are for support of a budgeted item that has / has not been approved by the PTA in the meeting minutes.

☐ Funds requested are for reimbursement of a budgeted item that has / has not been approved prior to spending by the PTA.

Today's Date: \_\_\_\_\_

Date of Expense/Event: \_\_\_\_\_

Amount requesting \$\_\_\_\_\_

PTA Budget Category: \_\_\_\_\_

Description of Event/Item:

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Explain how your request benefits the Students or Teachers of Jessup Elementary School.

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Your name \_\_\_\_\_ Email: \_\_\_\_\_

Position: \_\_\_\_\_ Contact information \_\_\_\_\_

For Funding, please prepare and attach a budget for the event including support for expenses. I have attached the budget for expenses. ☐

Denial Rationale: \_\_\_\_\_

Atalante Shay, PTA President \_\_\_\_\_, Date: \_\_\_\_\_

TO BE COMPLETE BY PTA TREASURER

Date Requested: \_\_\_\_\_

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

Amount Approved: \_\_\_\_\_

Date Approved/Denied: \_\_\_\_\_

Check Number: \_\_\_\_\_