

RANDOLPH PTO

RMS PTO Debit Card PreApproval

Date:

Date Needed: _____

Requested By:

E-mail: _____

Amount:

Vendor:

Event/Activity/Description:

Budget Category:

Description of Item(s) Purchased/Purpose of Funds Being Used (Be Specific):

Signature of person requesting approval:

Date: _____

Approved by PTO President or President-Elect:

Date: _____

Note: Attach all receipts and other applicable supporting documentation (i.e., purchase orders, contracts, etc. to this form)

- Requests should have an invoice and a complete Request for PreApproval signed by the requestor **and** PTO Executive Officer **before** submitting to the Treasurer. Email or place completed requests in the PTO mailbox in the staff workroom.
- Please allow 5 business days for payments to be processed.
- The Treasurer and PTO President CANNOT sign a check in which an amount is not inserted at the time the check is issued (in other words, blank checks will NOT be issued). An invoice/receipt/etc. is required for ALL checks.

For Treasurer's Use Only:

Category: _____

Date Paid: _____

Logged: _____