

REQUEST FOR DISBURSEMENT OF FUNDS TO PTO

SCHOOL: _____

DATE OF REQUEST: _____

AMOUNT OF DISBURSEMENT REQUESTED: _____

GL Distribution # to be used: _____

DETAILED ACCOUNTING OF FUNDS COLLECTED AND THEIR PURPOSE.

Disbursement Approved

Disbursement Not Approved

CSFO Notes/Comments:

Kari Austin, CSFO

Date

For School Use:

Check Date: _____

Check #: _____