

MASON PTO 2025-2026 REQUEST FOR CHECK

*****Please allow at least 2 weeks for the checks to be processed!!*****

Request Made By: _____ Email: _____

Phone #: _____ Date: _____ Signature of Requestor: _____

COMPLETE THIS SECTION FOR REIMBURSEMENT (checks to parents will be returned in your child's Friday Folder and checks to vendors will be mailed to them directly):

Description of Items	PTO Committee*	Amount

Total Amount Requested \$ _____

*PTO Committees are: Board Operating, Accounting Fees, Lion Stomp, Spooky Dance, Small & Tall, Cultural Arts, Homeless Children, 5th Grade Fun Day, Clinic Replenishment, Hospitality, International, Outdoor Habitat, Reading & Literacy, Arts Competition, Spirit Wear, All Pro Dads, PBIS, Yearbook, Red Ribbon Week etc.

IF REIMBURSEMENT IS DIRECTLY TO THE VENDOR:

Issue Payment To: _____ Contact Number: _____

Address (if not on invoice): _____

TEACHERS: Only 1 check per teacher so please save your receipts (checks will be put in your mail slot):

Teacher Grant (\$50 Max/Deadline 1/31/26) \$ _____ Grade _____

Fundraising Incentive (Deadline 1/31/26) \$ _____

Total Amount: \$ _____

Note: You must attach receipts to this form in order to be reimbursed.

NOTICE

Approval must be obtained on all purchases. Failure to obtain approval may result in the purchaser having to incur the expenses. Signature of a PTO President is required before the Treasurer will issue a check.

Approval: _____ Date: _____

For Treasurer's Use Only

Check No. _____ Date of Check: _____ Amount: _____

Charged to what budget item(s): _____

Signature of Treasurer: _____