

Lakewood Creek Elementary Home & School Organization

REIMBURSEMENT REQUEST

2/05 tan/white

Your Name _____ Phone _____

Date Submitted _____

Check Payable to _____

Full Address

Your check will be mailed to you.

Date Mailed _____

Project/Account _____ Amount \$ _____

Reason for Reimbursement _____

Receipt(s) totaling the amount of reimbursement must be attached. In accordance with our Bylaws, this form and receipts must be submitted within 45 days of the event or the request will be denied.

Approved by (PTO Officer) _____ Date _____

Approved by (PTO Officer) _____ Date _____

For Treasurer's Use Only

Account _____ Check # _____ Dated _____ Logged _____

Lakewood Creek Elementary Home & School Organization

CHECK REQUEST

2/05 pink

Your Name _____ Phone _____

Date Submitted _____

Project/Account _____

Date Needed _____

Reason for Check _____

Check Payable to _____

Amount \$ _____

Address of Payee (*if no bill attached*)

If this is a bill that needs to be paid, attach the bill to this form and the Treasurer will mail it.

Approved by (PTO Officer) _____ Date _____

Approved by (PTO Officer) _____ Date _____

For Treasurer's Use Only

Account _____ Check # _____ Dated _____ Logged _____

Lakewood Creek Elementary Home & School Organization

MISCELLANEOUS CHARGE

(Bank charges, Check Print Charges, Credit Card Service Fee, etc.)

2/05 purple

Your Name _____ Phone _____

Date Submitted _____

Project/Account _____

Date Charged _____

Reason for Charge _____

Charge Initiated By _____

Amount \$ _____

Approved by (PTO Officer) _____ Date _____

Approved by (PTO Officer) _____ Date _____

For Treasurer's Use Only

Account _____ Appeared on Bank Statement _____ Dated _____ Logged _____

Lakewood Creek Elementary Home & School Organization

DEPOSIT NOTICE

2/05 green

Your Name _____ Phone _____

Date Submitted _____

Project _____

Total Amount \$ _____

Specific Description of Source (*ex: payments for ice cream*)

Complete the following information for your deposit

Cash		Checks	
\$20	x _____ = _____		
\$10	x _____ = _____		
\$ 5	x _____ = _____		
\$ 1	x _____ = _____		
.25	x _____ = _____		
.10	x _____ = _____		
.05	x _____ = _____		
.01	x _____ = _____		
Total Cash \$ _____		Number of Checks	_____
		Total Checks	\$ _____

Accepted by (PTO Treasurer) _____ Date _____

For Treasurer's Use Only

Account _____ Transaction ID _____ Deposit Date _____ Logged _____

Lakewood Creek Elementary Home & School Organization

CASH BOX REQUEST

Complete One Form per Cash Box or Cash Belt

2/05 yellow

Your Name _____ Phone _____

Project _____

Date Submitted _____

Date Needed _____

Specific location for this change request (ex: Pizza Stand) :

Change Requested:

\$10 x _____ = _____

\$ 5 x _____ = _____

\$ 1 x _____ = _____

.25 x _____ = _____

.10 x _____ = _____

.05 x _____ = _____

.01 x _____ = _____

Total for this box \$ _____

Note:

Use one copy of this form to record the total boxes set up for this event and to act as support for the bank withdrawal.

Have each box verified by a volunteer before the event begins. At the end of event, the remaining money should be recorded on a green deposit form.

Total All Change \$ _____

Approved by (PTO Officer) _____ Date _____

Verified by Event Volunteer _____ Date _____

For Treasurer's Use Only

Account _____ Withdrawal # _____ Date _____ Logged _____

Lakewood Creek Elementary Home & School Organization

DEPOSIT SPLIT

Accounting for a large deposit

2/05 green

Your Name _____ Phone _____

Date Submitted _____

Total Deposit Amount _____

Account	Amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Cash Total	_____
Check Total	_____
Deposit Total	_____
# of Checks	_____

Accepted by (PTO Treasurer) _____ Date _____

For Treasurer's Use Only

Transaction ID _____ Deposit Date _____ Logged _____
