



Ronald C.  
Wornick  
Jewish  
Day School

## PTO Expense Reimbursement/Check Request

Requested By:	Phone:	Email:
Total Amount: \$	Date:	
Payable to:		
Address:		
City:	State:	Zip Code:

Payable For (please itemize):
PTO Budget Category (Required):
Event or Reason for expense:
Other Instructions:

Staple or tape receipts to a blank page and attach to this check request. Put completed form and receipts in the bottom drawer of the lobby desk in the file labeled Treasurer. Send an email to Roger Feigelson [roger.feigelson@intrada.com](mailto:roger.feigelson@intrada.com) to let him know there is a request in the box. Expenses need to be approved in advance by the PTO Officer/Committee Chairperson and PTO Treasurer. If you have any questions or you would like a soft copy of this form, please contact Ann Forman in the Business Office ([aforman@wornickjds.org](mailto:aforman@wornickjds.org)).

Signed:	Date:
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Committee Chairperson Approval (if applicable):	Date:
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PTO Treasurer Approval:	Date:
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