

# DMCS PTO

## Funds Request Form

Complete the form below in order to request funds from the PTO. Your request will be reviewed by the PTO at the next meeting. Your funds request will get a yes or no vote at that meeting, unless further information or consideration is requested by the PTO. The PTO funds must be used to benefit Dixon Montessori Charter School students' health, welfare, safety, or education, and your request will be considered in light of those requirements. Please attach or e-mail any research you have done on cost and be sure to include enough detail about how the funds will be spent.

Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

Classroom #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Date of Request \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Date Funds Needed by (if applicable): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Reason for your Request: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Items to be Purchased	Estimated Cost
<b>Total</b>	

If approved I would like to:  Submit a bill to be paid by the PTO  
 Submit receipt(s) of purchase to be reimbursed by the PTO

Funds request will be discussed and voted on at the next PTO meeting following submission of this request. If your request is approved, every attempt will be made to make funds available within 10 business days unless special circumstances apply. In the event your request is denied we will include reasons for denial. The PTO will reconsider resubmission of previously denied requests, but in no way promises approval if resubmitted.

PTO USE ONLY:

Date of PTO Meeting: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Decision of Request: (Circle one):

1<sup>st</sup> submission:

Approval  Approval \*(with stipulations stated below)  Denial  More Information Needed

Stipulations for Approval/Reason for Denial/Additional Information Being Requested: \_\_\_\_\_  
 \_\_\_\_\_

PTO President/Officer Signature: \_\_\_\_\_

2<sup>nd</sup> submission: Rec'd for reconsideration on: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Date of PTO Meeting: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Approval  Denial (request is closed)

PTO President/Officer Signature: \_\_\_\_\_