Patriot Oaks Academy PTO, Inc.
475 Longleaf Pine Parkway
Saint Johns, FL 32259
www.PatriotOaksPTO.org

President: Robyn Lilac
Treasurer: Tonya Porter

Submitted by:	
Contact email/phone for any questions:	
Submission Date: (must be within 30 days of expense/event)	
Total Amount of Reimbursement or payment:	$
Make check payable to:	
Send check to address or pick up from PTO box:	

Breakdown of Expense Reimbursement:

Date	Description	Committee	Amount $

I certify that the above expense is for official PTO expenses and supplies. I have enclosed a valid receipt or bill in an envelope with this completed form. _____(Initial). I have enclosed a copy of any foil paper receipts (these fade over time so the PTO needs a copy for tax purposes). _____ (Initial).

_____Signature of Submitter

_____Signature of Treasurer

Treasurer Only:

Approved in Annual Budget:	
Approved during PTO meeting:	
Date Paid:	
Account:	
PTO CC# or Check# Paid with:	
Amount:	$