

Gates School PTO Expenditure Form

Please indicate request for reimbursement *or* notification of donation.
Please submit this form and related documents to the PTO Treasurer.

_____ **Request for Reimbursement (Please attach your receipt)**

Date: _____

Remit to: _____
Purchaser's name

Address: _____

Description of items to be reimbursed: _____

Total Reimbursement Requested: _____

Signature: _____

_____ **Notification of Goods, Services, or Funds Donated***

Donor Name: _____

Description of goods, services, or funds donated: _____

Estimated Actual Value of Donation: _____

Signature: _____

* Tracking the value of donations made to the PTO will help in preparing future budgets. Those activities that rely heavily on additional donations may be eligible for increased funding in future years. Thank you for providing this information.