



Larsen PTO Fund Request Form

Date: _____

Name: _____

Email: _____

Total Amount Requested: _____

Explanation for Fund Request (*Please attach 3 quotes for any expense in excess of \$500, or explain unique circumstances):

Requests are reviewed at monthly board meetings. You will be contacted with the status of your request. Once you have been approved and have paid for your item(s), you may complete a PTO General Reimbursement Form to receive reimbursement.

Please contact Treasurer, Betty Myers, with any questions at brmyers_68@yahoo.com.

Complete top portion only.

BOARD APPROVAL: _____