

**PTO PARENT/TEACHER REQUEST EXPENDITURE FORM**  
***YOU MUST ATTACH 3 WRITTEN QUOTES FOR YOUR ITEM***

The item I would like the PTO to purchase/help purchase is (be specific: details or description of item):

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The total cost (includes cost, taxes, shipping & handling): \_\_\_\_\_

The reason I feel it is necessary is because:

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Request is being made by: \_\_\_\_\_ (Parent/Teacher)

My contact information: ph# \_\_\_\_\_ email \_\_\_\_\_

**REVIEW PROCESS:**

Dean Yvette Brown \_\_\_\_\_

Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_

Reason: \_\_\_\_\_

Barbara Ireland, Business Manager \_\_\_\_\_

Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_

Reason: \_\_\_\_\_

ACS/PTO

President: \_\_\_\_\_

Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_

Reason: \_\_\_\_\_

**Appeals Process**

ACS/PTO General Meeting Date: \_\_\_\_\_

# of Votes for \_\_\_\_\_ # of Votes against \_\_\_\_\_

Reason: \_\_\_\_\_

**COMPLETED FORM MUST BE IN THE PTO BOARD'S POSSESSION TWO WEEKS PRIOR TO THE BUDGET MEETING, TO ALLOW FOR REVIEW AND PUBLIC POSTING IN THE AGENDA.**

**DEADLINE: APPROVAL IS GOOD FOR 60 DAYS**