

# Teacher Fund Request

**\*\*Pre-Approval required\*\***

Benjamin Elementary School PTO

|       |        |
|-------|--------|
| Name: | Grade: |
|-------|--------|

|                 |            |
|-----------------|------------|
| Date submitted: | Date paid: |
|-----------------|------------|

What will the money be used for?

How will this purchase be used in the classroom or school?

Once approved, please provide copies of receipts once purchased, invoice in need of payment or any other details available in regards to amount of purchase.

Please note that non-consumable items bought by the PTO for Benjamin Elementary become property of Benjamin Elementary School and are to stay at the school.

Teacher signature:

|             |         |
|-------------|---------|
| Payable to: | Amount: |
|-------------|---------|