



T. H. ROGERS SCHOOL
PARENT TEACHER ORGANIZATION
VANGUARD • PDHH • PSI/MI

Request for Funds

Thank you for contacting the PTO with your request. Before submission of this form, please check with the Principals to see if the school will be able to cover this request. If the school is unable to pay for the item(s), then the PTO may be able to consider your request. Thank you.

Name _____

Date Submitted _____

Position at T.H. Rogers _____

E-mail Address _____

Date of Event (If Applicable) _____

Reason for Funds _____

Total Amount Needed \$ _____

Amount Paid by School \$ _____

Amount Requested from PTO \$ _____

I've checked with the Principals to see if the school will be able to cover this request, and they are not able to cover the entire cost at this time.

Principal's Signature: _____

Reason for inability to cover complete cost: _____

Approved by (PTO Co-President) _____

Date _____

For Treasurer's Use Only

Account _____ Check # _____ Dated _____ Logged _____