

ALTITUDE ELEMENTARY SCHOOL PTCO

Disbursement Request Form

Name of person submitting request: _____

Amount requested \$: _____ Date requested: _____

Project/Event:

Description (include date of Board approval, if non-budgeted item):

Check Payable to: _____

PTCO debit card used

Remit Check: Mail PTCO Mailbox (Front Office) Pick Up/Deliver

Mailing Address (if not on invoice): _____

If this is a bill that needs to be paid directly to a vendor, please attach the bill/invoice to this form and the Treasurer will mail it. Leave in the PTCO Mailbox in the front office at school or scan and email copies to treasurer@altitudePTCO.com.

If this is a reimbursement of personal funds, please attach original receipts and leave in the PTCO Mailbox at school for the Treasurer to collect. The Treasurer is required to collect and keep original receipts. Please note reimbursements will not be made without appropriate documentation.

Check #: _____

Amount \$: _____

Date Paid: _____

Approval: _____

Note: Approval required by Treasurer for all payments made. If the Treasurer is requesting the disbursement, another authorized signer is required to sign here.

ALTITUDE ELEMENTARY SCHOOL PTCO
Deposit Notice Form

Name of person submitting deposit: _____

Date deposited: _____

Total amount deposited (cash and checks): \$ _____

Specific description for each deposit source (e.g. Holiday Shop, Spirit Night, Carnival tickets):

Cash:

\$100 x _____ = _____

\$50 x _____ = _____

\$20 x _____ = _____

\$10 x _____ = _____

\$5 x _____ = _____

\$2 x _____ = _____

\$1 x _____ = _____

Coins:

.25 x _____ = _____

.10 x _____ = _____

.05 x _____ = _____

.01 x _____ = _____

Total Cash: \$ _____

Cash Counted and Signed Off By: (Person 1) _____

(Person 2) _____

Checks:

| Check No. | Payee and Source/Event | Amount |
|-----------|------------------------|--------|
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Total Checks: \$ _____

Accepted by (Treasurer): _____

Date: _____

The bank deposit receipt is required to be attached to this form.

Retain all documentation (letters, check stubs, etc.) included with amounts received and remit to the Treasurer for tax donation acknowledgement purposes.



ALTITUDE ELEMENTARY SCHOOL PTCO Grant Request Form

Thank you for applying for a PTCO grant. Please complete the application, with Principal signature, and return it to the PTCO mailbox by the deadline announced. **All grant requests must include a detailed description, with support for the amount requested, including shipping and taxes (if applicable). All funds must be spent by the end of the school year in the school year they are requested.** If they are not spent, the funds will be retained in the PTCO bank account for later use and may be used for a different purpose.

The mission statement of the PTCO is to assist in attaining the highest level of education and welfare for the entire student body of Altitude Elementary School through the cooperative efforts of the Faculty and Staff, the Cherry Creek School District community and the parents. This means that **money raised is to be used to enhance the educational experience and well-being of our students.** The IRS requires that all non-profits state their mission and use their tax deductible donations for that mission.

Teachers are encouraged to submit proposals that will benefit their individual classroom or grade level, however preference may be given to proposals that offer school-wide access to our students. Proposals will be considered in totality to allow decisions based on equity among grades and classrooms. **Grant funding will not be awarded for projects/materials typically provided by the school district.**

All items purchased through the grant program become the property of Altitude Elementary School and must be retained by the school in the event the staff person who requested the items is no longer an employee of the school.

Please remember that the Cherry Creek Schools Foundation may be another source of funds – www.ccsdfoundation.org.

If you have any questions regarding the application process, please contact the PTCO Treasurer (treasurer@altitudeptco.com).

Thank you for your application!

Applicant name: _____

Grade/department: _____

Grant request title: _____

Date of request: _____

Amount requested: _____

Detailed description of request (**attach support to grant request, including shipping and taxes, if applicable**):

How will funds enhance or improve the education of our students?

Is the request time sensitive? If yes, explain:

Comments/additional information, if any:

Applicant's Signature

Principal's Signature

PTCO USE ONLY

Board vote date _____

Result: Approved Declined More information needed

Amount approved _____

Date applicant notified _____