**GROVE PATTERSON ACADEMY**

**FINANCIAL TRANSACTION REQUEST FORM**

**Date**:

**To:** **From**:

[ ]  I would like a reimbursement check in the amount of

$      for:

[ ]  I am requesting the ([ ] purchase / [ ] deposit) of:

*You must have (2) Signatures to verify funds counted if you are requesting a deposit.*

Check the funding source [ ]  School Improvement Funds [ ]  Title I [ ]  Student Activities

[ ]  Success for All [ ]  PTO [ ]  Other

**Requestor**:       **Principal Signature**:

**Additional Approver**:       **Additional Approval**:

All forms must be submitted to the Designee and the Principal **at least two (2) weeks** in advance. **All reimbursements must be pre-approved prior to purchase and submitted with original receipts.** **Receipts cannot have any personal purchases.** Failure to do so may result in the delay and/or denial of your request.

**Please check the correct box:** **[ ]  Request Approved** [ ]  **Request Denied**

**[ ]  ORIGINAL – Designee** **[ ]  COPY- Principal** **[ ]  COPY – PTO** **[ ]  COPY - Originator**