



# CORNERSTONE ACADEMY PTO REIMBURSEMENT REQUEST FORM

Teacher's Name: \_\_\_\_\_ Date: \_\_\_\_\_

What is the reimbursement request for? What event specifically?

Total Amount of Request: \_\_\_\_\_

## Breakdown of Costs

[illegible]

**By signing this form, I confirm that all data entered is accurate, and will provide invoices and receipts as necessary.**

## Signature

Date \_\_\_\_\_

Please include a copy of your receipt(s) along with this form and any questions you have and send to [cornerstoneacademypto@gmail.com](mailto:cornerstoneacademypto@gmail.com). Reimbursement can take up to 6 weeks to approve or process.

**Cornerstone Academy PTO will not be able to reimburse anyone without accompanying receipts.**

Thank you,

## Your CAPTO

Approved Date: \_\_\_\_\_ Denied Date: \_\_\_\_\_ (short explanation attached)

Board Member Signature: \_\_\_\_\_

If outside of budget, date of board voting and approval: \_\_\_\_\_

*Cornerstone Academy PTO (CAPTO) does not guarantee reimbursement unless it has been agreed upon ahead of time, in writing (email communications are fine). All reimbursements made after purchases will require board approval and accompanying paperwork.*

You can also find this form online for submission at