



PIN OAK MIDDLE SCHOOL PTO

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PIN OAK MIDDLE SCHOOL – PTO PAYMENT/REIMBURSEMENT REQUEST FORM

Authorized by: _____ (Committee Chair or Vice President)

If authorized signature is not included, this reimbursement will not be processed. If needed, have the Committee Chair or Vice President send an e-mail authorizing payment to the Treasurer.

Date Requested: _____ Date needed by: _____

Requestor's Phone: _____ Email: _____

Requested by: _____ Amount: \$ _____

Pin Oak Middle School PTO Inc. is a tax-exempt organization under section 501(c)(3) of the Internal Revenue Code, and is therefore exempt from paying sales tax on purchases. As such, we DO NOT reimburse individuals for sales tax. To avoid paying sales tax, please use our tax exempt form.

Mailing address:

Check should be made out to: _____

Name/Company: _____

Address: _____

City: _____, State: _____ Zip: _____

Please check the appropriate category below. Please use one form per category.

<input type="checkbox"/> 6th Grade Activities	<input type="checkbox"/> Faculty & Staff Appreciation	<input type="checkbox"/> School Store: Candy
<input type="checkbox"/> 6th Grade Orientation	<input type="checkbox"/> Grants (All grants)	<input type="checkbox"/> School Store: Charger/NSO
<input type="checkbox"/> 7th Grade Activities	<input type="checkbox"/> Hospitality	<input type="checkbox"/> School Store: Uniforms
<input type="checkbox"/> 8th Grade Activities	<input type="checkbox"/> Mailing/Postage	<input type="checkbox"/> School Store: General
<input type="checkbox"/> Auction	<input type="checkbox"/> Membership	
<input type="checkbox"/> Auction Wish list items	<input type="checkbox"/> Pin Oak Idol	<input type="checkbox"/> Technology/Web
<input type="checkbox"/> Beautification	<input type="checkbox"/> President's Discretionary Fund	<input type="checkbox"/> Administration
<input type="checkbox"/> Book Fair	<input type="checkbox"/> Principal's Discretionary Fund	<input type="checkbox"/> Communications
<input type="checkbox"/> Charger Camp	<input type="checkbox"/> Publicity	<input type="checkbox"/> Activities
<input type="checkbox"/> Cherrydale	<input type="checkbox"/> School Directory	<input type="checkbox"/> Development/Fundraising
<input type="checkbox"/> Facility Stipend	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Treasurer/Finance

Please complete this form & attach all receipts and/or invoices to the back of this form (stapled to back is preferred) and place it in the PTO BOX in the PTO office – in the TREASURER'S Folder or send an e-mail to treasurer@pinoakpto.org that your form is signed by the authorized chairperson(s).

Also, you may request payment directly to vendors from this form, by attaching approved invoice and completing this form. Please allow at least 10 business days for payments to be processed. If payment needs to be processed urgently, please contact the Treasurer to advise this is an urgent request or pay the vendor & submit for reimbursement to ensure payment is made timely to vendor.