

Fogelsville PTO

312 S. Route 100 Breinigsville, PA 18031

REQUEST FOR FIELD TRIP FUNDING

Requestor's Name _____

Grade Level _____ Amount Requested \$ _____

Check Payable To _____

Date of Trip _____

Date Check Needed _____ (Please allow minimum of one week's notice)

Please provide an invoice/statement for tax purposes

Additional Comments/Information:

Please email PTO Treasurer, Arika Troxell arikatroxell@gmail.com or PTO President Shannon Shetayh smshtayh@gmail.com with any questions

Thank you,
PTO Executive Board

PTO Treasurer Use	XXXXXXXXXX
Check Number	
Check Date	
Check Amount	
Check delivery method	
Check delivery date	
Initials	