



# Wards Creek Elementary School PTO

## Debit Card Purchase Request

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Date of Purchase

Purchase Location:

\_\_\_\_\_

\_\_\_\_\_

Amount of Purchase:

Event/Reason for Purchase:

\$ \_\_\_\_\_

\_\_\_\_\_

Purchaser Signature: \_\_\_\_\_

*For Treasurer Use Only*

PTO Officer Approval \_\_\_\_\_

Budget Line Charged:

\_\_\_\_\_

***All Receipts/Invoices Must Be Attached***