



Victory Elementary PTO  
**Debit Card Request**

Your Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Committee/Event: \_\_\_\_\_

1<sup>st</sup> Account \_\_\_\_\_

Allocation/Amount: \_\_\_\_\_

2<sup>nd</sup> Account \_\_\_\_\_

Allocation/Amount: \_\_\_\_\_

Name of company requiring use of card: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Date Needed: \_\_\_\_\_

Reason for Debit Card: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

The minimum cost associated with use of this card shall be \$250. All debit card expenses over \$500 must be approved by two board members preferably co-presidents and/or vice president. The approval of charges must be signed by two board members not using the card.

**Purchasers shall understand that the card MUST remain in physical custody of a Co-president or the Treasurer at all times. All purchases must obtain appropriate handwritten signature(s) below prior to submitting to Treasurer:**

Approved by \_\_\_\_\_ Date \_\_\_\_\_  
 (PTO Officer)

Approved by \_\_\_\_\_ Date \_\_\_\_\_  
 (PTO Officer)

For Treasurer's Use Only

Accepted by \_\_\_\_\_ Date \_\_\_\_\_  
 (PTO Treasurer)

Dated:		Total Charge Amt:	Logged
Account allocation:			