

PTO Field Trip Reimbursement Form

PTO reimbursement is limited to \$15 per attending student. Teachers are not included in this calculation as they are funded by the school. This form should be submitted **AFTER** you have attended the field trip so you have an accurate head count. Please attach this form to **ALL** receipts that support the total below. In addition, please attach the letter that went home with students regarding the field trip. Please make sure to mention that the Panthers PTO is providing field trip support for all students.

Date of Field Trip: _____ Grade: _____

Field Trip Name: _____

Field Trip Expenses:

| | | | |
|----------------------------|-----------------|---------------------|-----|
| # Attending Students _____ | x Admission Fee | \$ _____ = \$ _____ | (a) |
| | x Lunch | \$ _____ = \$ _____ | (b) |
| | x Other _____ | \$ _____ = \$ _____ | (c) |
| | Bus Fee | \$ _____ | (d) |
| | | | |
| Total (a thru d)= _____ | | | (e) |

Payment from Parents:

| | | | |
|----------------------------|------------------|---------------------|-----|
| # Attending Students _____ | x Parent Payment | \$ _____ = \$ _____ | (f) |
| Total (e LESS f)= \$ _____ | | | (g) |

Attending Students _____ x \$15 per student \$ _____ (h)

The lesser amount of item (g) or item (h) \$ _____
This is the amount of reimbursement.

All checks will be made payable to DG Cooley Elementary School unless you indicate otherwise below.

Please make checks payable to: _____

Principal Approval: _____ Date: _____