



Manteno Parent Teacher Organization
555 W. Cook Street • Manteno, IL 60950

Teacher's Allocation Request

Teacher/Staff Name: _____

Email : _____

Grade: _____

Make Check Payable To: _____

Items to be purchased:

Quantity	Description	Amount

Total: \$ _____

Benefit to teachers: (How will this enhance your work as an educator?) _____

Benefits to students: (How will students benefit from your proposed activity?)

X _____ DATE: _____

Signature of person requesting funds

Bring this form to a PTO meeting to present your request (keep a copy for yourself). Once it is approved, complete a Purchase Order in Skyward and mark it "PTO Allocation." If you have any questions, please email Sue at mcasa888@gmail.com.

Date approved by PTO Board: _____

Funds disbursed on: _____ Check #: _____

Funds disbursed to: _____