

NAIS PTO DEBIT CARD USAGE FORM

Name: _____ Email: _____

Event or Committee: _____

Date Used: _____

Where Used: _____

Purpose of Expenditure: _____

Amount: _____

ATTACH ALL INVOICES, ORDER FORMS OR RECEIPTS

Submitter Signature

Date

For NAIS PTO Treasurer Use:	
Form #:	
Date Cleared:	
Budget Category:	
Comments:	