

Fountain Hills Unified School District



Parent Teacher Organization

Request For PTO Funds 2021/2022

Name of School: _____

Person Requesting Funds: _____

Amount Requested: _____

Date Requested: _____

Funds Needed by: _____

Items to be Purchased with Funding:

Beneficial Impact:

*Complete this form and return to the V.P. of your school for PTO Board Review/Approval.
Forms will not be reviewed or approved without Principal signature.*

Principal Approval: _____ Date: _____

PTO Use Only:

Approved: _____ Denied: _____ President Initials: _____ Date: _____

Purchased by District or PTO: _____

~Flying High With Falcon Pride~

www.fhusdpto.org / info@fhusdpto.org