



REIMBURSEMENT FORM

Each year, as a thank you for all that you do, the Dakota Valley PTO would like to reimburse our teacher members for up to \$150 in purchases.

Teacher Name: _____

First Year of Teaching? Yes No

Teachers in their first year out of college are eligible for \$200 in reimbursement.

Teacher Email: _____

Grade/Subject: _____

Total Reimbursement Requested: _____

I am a current PTO member.

You can join at www.dakotavalleyPTO.com/teachers

I have included receipts for all purchases.

Please wait to submit this form until you've made all purchases.

Teacher Signature: _____

Please return the completed form to the PTO mailbox in the Admin Office.

FOR PTO USE ONLY

Amount Paid: _____ Check #: _____ Date: _____

Questions? Email Us: admin@dakotavalleypto.com