

Hull Parent Teachers Organization
P.O. Box 56, Hull, Ma. 02045
pto@town.hull.ma.us

Co-President: AnnMarie Dunn
Co-President: Sharon Striglio

Vice-President: Sherry Kearns
Secretary: Nancy Sullivan
Treasurer: Linda Neville

Funding Request Form 2009-2010

Request Date: _____ Deadline Date: _____

Name: _____ Phone/e-mail: _____

School: _____ Grade: _____ number of students: _____

Amount Requested: _____ Check Payable to: _____

**Please use the back of this form to briefly describe the request you would like the PTO to fund and it's benefits. Include how the money is to be used.
This request needs to be received a minimum of 6-weeks prior to your field trip/activity to provide ample time to be discussed and voted on at a scheduled meeting. Meetings are listed below.**

If you are requesting additional funding from another group(s) for this request, please provide those details.

Organization Name(s) & amount(s): _____

Principal Authorization: _____ **Date:** _____

Should this request be to fund a periodical or book, the request must be presented to the School Committee for approval.

Authorization of School Committee: _____

Please note: If the request is granted, ALL BILLS/RECEIPTS must be submitted to The Hull PTO for payment or reimbursement.

Please place this form in the PTO box in your school office & send an e-mail to confirm that a request has been submitted to sstriglio@town.hull.ma.us or adunn21n@comcast.net

Scheduled PTO Meetings: Memorial School: 9/10, 11/12, 1/14, 3/11, 5/13
Jacobs School: 10/14, 12/9, 2/10, 4/14, and 6/9