



BRAHAM
ELEMENTARY PARENT ORGANIZATION
B.E.P.O.

DONATION REQUEST

The Braham Elementary Parent Organization is requesting that all K-6th Teachers/Staff who wish for us to make a donation to them please fill out the form below. We will review all requests at our regularly scheduled meetings (2nd Monday/Month). Due to our organization's budget we may not be able to approve all requests. We encourage teachers/staff to make requests for items and/or projects that will directly benefit the students.

Please note all approved donation requests have 90 days from the date of approval to submit receipts for reimbursement. All unpaid approved requests after 90 days will be considered void.

Thank you for your cooperation as together we strive to advance the quality of education for all students at Braham Elementary.

Additional forms may be found in the B.E.P.O. mailbox at both the Elementary and High Schools.

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Date _____ Grade/Subject _____

Requestor Name _____

Amount Requested \$ _____

Money is to be used for (Please be specific):

For B.E.P.O. Use

Date: _____ Approved / Denied

Receipts Rec'd Date: _____ PD Date: _____ CK # _____