

Check Request

YOUR NAME:		PHONE:	
		() -	
PROJECT/CATEGORY:			
DATE SUBMITTED:	DATE NEEDED:	DATE MAILED:	
/ /	/ /	/ /	
REASON FOR CHECK:			
<input type="checkbox"/> INCLUDED IN ANNUAL BUDGET		or	<input type="checkbox"/> APPROVED AT MEETING (DATE: / /)
CHECK PAYABLE TO:		AMOUNT:	
		\$	
ADDRESS OF PAYEE: (if no bill attached)			

If this is a bill that needs to be paid, attach the bill to this form and the Treasurer will mail it.

APPROVED BY (PTO OFFICER):	DATE:
	/ /
APPROVED BY (PTO OFFICER):	DATE:
	/ /

For Treasurer's Use Only: Category _____ Check # _____ Dated _____ Logged _____