

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 _____