## Check Request for RES PTO

NAME OF REQUESTOR:		PHONE:		
		(	)	-
PROJECT/CATEGORY: (Circle/Highlight Best Spirit Wear Social/Popcorn Yearbook SCF Staff/Teacher Allocation Volunteers			·	Person
Rock the House: (Circle/Highlight Best One)	3ake Sale Baskets Décor. Dinner	Grab Bag Performe	rs Food/Bev. Raffle Othe	r:
PTO Committee Miscellaneous:				
DATE SUBMITTED:	DATE NEEDED:		DATE MAILED/DELIVER	ED:
/ /	/	/	/	/
REASON FOR CHECK:				
(CIRCLE/HIGHLIGHT BEST ONE) INCLUDED IN ANNUAL BUDGET	APPI	ROVED AT MEETING	(DATE: / / )	
CHECK PAYABLE TO:			AMOUNT:	
ADDRESS OF PAYEE: (if no bill attached)			1	
f this is a bill that needs to be paid,	attach the bill to this form and	the Treasurer w	vill mail it.	
APPROVED BY (PTO OFFICER):			DATE:	
				/
APPROVED BY (PTO OFFICER):			DATE:	,
			/	/
		D		
For Treasurer's Use Only: Category	Check #	Dated	Logged	

PTOTODAY