

Meadow View Elementary PTO Check Request Form

Date: _____

Payable To: Name: _____

Address: _____

Phone: _____

Reason for check: _____

Amount: _____

****Please attach original receipt(s)****

Please note, amounts can be grouped onto one form as long as they are for the same budgetary reason

Signature of requestor: _____

To be completed by Treasurer

Date Received: _____

Budget line item category: _____

Budget amount approval date: _____ Budget amt remaining: _____

Date request approved: _____ Check Number: _____

Treasurer signature: _____

2nd approval (if necessary): _____

Spreadsheet: _____ Reconciled: _____

Check Number: _____ Received by: _____

Date: _____