

# Check Request Form

## Thorson Elementary PTO

Requested by: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Account to be charged: \_\_\_\_\_ Amount requested: \$ \_\_\_\_\_

Reason/comment/description of expense: \_\_\_\_\_

***Itemized (receipt, invoice, vendor purchase order or other documentation acceptable by the IRS must accompany this request. Charge receipts are not accepted by the IRS.***

Make check payable to: \_\_\_\_\_

Please forward the check as follows:

\_\_\_\_ Send home with my child: name \_\_\_\_\_ Place in the PTO file under the file name:

\_\_\_\_ Teacher's name \_\_\_\_\_

\_\_\_\_ Mail in the attached self-addressed envelope Other: \_\_\_\_\_

Requestor signature: \_\_\_\_\_

Committee Chair signature: \_\_\_\_\_

Date paid: \_\_\_ / \_\_\_ / \_\_\_ Amount paid \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Treasurer: \_\_\_\_\_

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Requestor signature: \_\_\_\_\_

Committee Chair signature: \_\_\_\_\_

Date paid: \_\_\_ / \_\_\_ / \_\_\_ Amount paid \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Treasurer: \_\_\_\_\_