

Barretts PTO
Check Request Form
(Use a separate form for each Payee)

Please complete the form below, attach invoice or receipts to this form,
and submit to the PTO Treasurer.

Date of request: _____

Name of person requesting payment: _____

Phone number (in case of questions): _____

| <u>Project Name</u> <small>(Line item in F/S)</small> | <u>Reason or use for the expense</u> | <u>Amount</u> |
|--|--------------------------------------|---------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Total Amount of payment requested \$ _____

Payable to: _____

Address: _____

Signature of Committee Chairperson (for approval) _____

Are you within your budget for the year? _____

If not, please explain why: _____

| | |
|------------------------------------|---------------|
| *****For Use by PTO Treasurer***** | |
| Date paid _____ | Check # _____ |