Buckeye Elementary PTO

Check Request Form

	Name:	Phone:
	Date Submitted:	Amount \$:
	Activity/ Event:	
	Reason for Check:	
	Included in annual budget:	_
	OR	
	Approved at meeting date:	_
	Check Payable to:	
	Address of payee:	
	Attach all receipts or invoices to the	check request form.
For	Freasurer's Use Only:	
Category		
	5 ,	
Check #		
Dated		
Dateu		