CHECK REQUEST

(You need the PTO to send a check to pay someone)

Alton Darby Elementary PTO

Your Name:		Phone:	-
Project/Category:			
Date Submitted:	Date Needed:	Date Mailed:	
Reason for check:			
INCLUDED IN ANNUAL BU	DGET OR APPROVED AT	MEETING (DATE: / /)	
Check payable to:		Amount: \$	
Address of Payee: (if no bi	ll attached)		
If this is a bill that need	s to be paid, attach the bill t	o this form and the trea	surer will mail i
Approved by (PTO officer)	:	Date:	
PTO Treasurer Use: Catego	ry	Date L	ogged