

Harmony Elementary PTO CHECK REQUEST FORM

Date Submitted: _____

Submitted by: _____

Committee: _____

Event: _____

Please attach the original receipt(s) to the back of this form, Additionally, in order for you to receive your reimbursement check, PLEASE attach a self-addressed, stamped envelope to the form, along with your receipts and place in the Treasurer's folder located in the PTO drawer in the front office.

Make check payable to:

Name

Amount

_____ \$ _____

_____ \$ _____

Items purchased or explanation of expense:

For Treasurer's Use

Tax-exempt Certificate Used? Yes No N/A

Check Number: _____ Date Paid: _____ Prepared by: _____