



# Totoket Valley Elementary School PTO Check Request

Date: \_\_\_\_\_

Name of Person Requesting Check: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

Purpose: \_\_\_\_\_

Check Payable to?: \_\_\_\_\_

If check is payable to vendor, please provide the vendor details:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

**Please attach receipts to this request OR hand them in after you receive them.**

When check is requested please notify: [Stacey.parente@yahoo.com](mailto:Stacey.parente@yahoo.com)/ 484-4060

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(For PTO Treasurer Use)

Check Amount Issued: \_\_\_\_\_

Date of Check: \_\_\_\_\_

Check Number: \_\_\_\_\_

Budget Line Item: \_\_\_\_\_

