

PGA PTO Check Request Form

Date: _____
Name: _____
Email: _____
Phone: _____

Delivery of Check:

- Pick up from office
- Mail to address below
- Other

Procedures:

- Tape the invoice to the back of this sheet, if applicable.
- Place this completed form and invoice in an envelope addressed to PTO Treasurer and give to April in the office.
- If you would like to retain a copy of this request, please photocopy this form and the invoice. Please only turn in originals to the PTO Treasurer.
- Checks will be disbursed within 10 days of receipt.

Description of Check Request (Please describe the reason for this request in the space below:

Amount of Check Request:

\$ _____

Name that Check should be made out to:

Address for Check to be sent to (if applicable):

Questions? Contact PTO Treasurer:

Stacy Petersen
stacypetersen@gmail.com
970-980-3847

Check written date: _____ Check Number: _____

Amount Approved: _____ Amount Still to be Spent: _____