Deerlake Middle School PTO Check Request

Your Name		Phone	
Date Needed		Date Submitted	<u> </u>
Amount \$		_ Project/Accoun	t
Reason for check	ς (ex. cash box, pizz	za, luncheon, etc.)	
Address of Payer	e (if no bill attached	l)	
Treasurer will m - Original receip	hat needs to be paid nail it. ot(s) must be submit opy of receipt(s) for	tted to Treasurer	-
	-	_	uest submitted. Please gnatures are required
Approved by (PTO Officer)			Date
Approved by (PTO Officer)			
For Treasurer's Use only			
Account	Check #	Dated	Logged