

Bellaire High School PTO  
**Check Request**

8/00 pink

Your Name \_\_\_\_\_ Phone \_\_\_\_\_

PTO Position/Committee \_\_\_\_\_ Date Submitted \_\_\_\_\_

Budget Line Item to be Charged \_\_\_\_\_

Date Needed \_\_\_\_\_

Reason for Check \_\_\_\_\_

\_\_\_\_\_

Check Payable to \_\_\_\_\_

Amount \$ \_\_\_\_\_

Address of Payee (*if no bill attached*)

\_\_\_\_\_

*If this is a bill that needs to be paid, attach the bill to this form and the Treasurer will mail it.*

Approved by (PTO Officer) \_\_\_\_\_ Date \_\_\_\_\_

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For Treasurer's Use Only

Account \_\_\_\_\_ Check # \_\_\_\_\_ Dated \_\_\_\_\_ Logged \_\_\_\_\_

\_\_\_\_\_