

CHECK REQUEST ~ Use this form to pay invoices to businesses or vendors

Cornwall on Hudson Elementary School PTO

(According to the COH PTO By-laws any expense over \$100 must be approved before the purchase is made.)

Name:		Contact #:
Event / Fundraiser:		
Reason for Request:		
Check Payable To:		Can the PTO pay using a Credit Card? Yes No
Amount:	Date approved by the PTO if over \$100:	Date Needed:
Mailing Address:		

The invoice must be attached to this form and a check will be mailed directly to payee. Please keep a copy of the invoice for your records.

Approved by _____ Date: _____
(PTO Officer):

Approved by _____ Date: _____
(PTO Officer):

For Treasurer's Use Only:

Check #: _____ Date: _____ Entered: