

Check Request

UPA PTO, David Holl, dmholl@yahoo.com, 408-497-2237

Your Name:		Phone: () -
Project/Category/Event:		
Date Submitted: / /	Date Needed: / /	Date Mailed: / /
Reason for Check:		

Included in Annual
Budget

or

Approved at Meeting
(Date: / /)

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: / /
Approved by (PTO Officer):	Date: / /

For Treasure's Use Only: Category _____ Check# _____ Date _____ Logged _____