

RIVERWATCH PTSO CHECK REQUEST FORM 2024 - 2025

Person	requesting:		
Date of	request:	Requester's phone number:	
Reques	tor's Email:		
Make tl	ne check payable to:		
	t of check: \$	(Petty cash should be requested on the Petty Cash Request/Receipt form)	
Purpose	e of check:		
Deliver	y method:		
	Requestor will pick up th	ne check in the PTSO mail box in the front office at RMS.	
	PTSO to send the check home with a student.		
	Student name:	Homeroom teacher:	
	PTSO to mail the check to this address:		
	Other:		
		n purchased, please attach ORIGINAL receipt(s) to this form and turn in as	

soon as possible after purchase. If items are yet to be purchased, please attach an invoice showing the amount to be paid. Prior to any purchases, a Board Representative must be aware and approve the expenditure. Purchases should fall within budget limitations for your event. Failure to obtain pre-approval or exceeding budget limits may result in the purchaser having to incur the expenses. Receipt or invoice and signature of the PTSO president are required before the treasurer will issue your requested check. After this form is completed, please place it in the PTSO mailbox in the front office and notify the president via email at RiverwatchMSPTSO@gmail.com. Thank you!

Signature of requester:				
PTSO President approval:	Date:			
FOR TREASURER'S USE ONLY				
Date issued: Cl	heck number:			
Charged to what budget item:				
Comments:				
Treasurer's signature:				