

Check No. _____

Lafayette Avenue School PTO
Check Request Form
Submit form to:
Lisa Schriver Flood - Treasurer
lisaschriver@hotmail.com / 717-968-5656

Date _____

Check Payable To _____

Amount of Check _____

Purpose of Check to be Issued:

(NJ Sales Tax Exempt Form ST-5 is available for use. Contact Treasurer for copy to be used for purchases of goods/services).

Requested By _____

Email Address _____

Date Required _____

Check to be:

_____ Mailed to _____

_____ Picked Up from LAF PTO Mailbox

_____ Picked Up from 3 Lackawanna Ct.

No check will be issued without a completed Check Request Form and supporting documentation (invoices/receipts/proof of payment). Check Request Forms may be left in the Treasurer Folder in the LAF PTO Mailbox at the school office, brought to a PTO Meeting or mailed/dropped off to Lisa Schriver 3 Lackawanna Ct.

To be completed by Treasurer

Check Date _____ Account to be Charged _____