CHECK REQUEST FORM 2025-2026 PROCEDURES

All committee chairpersons and committee members seeking reimbursement for approved budget expenses must complete the Check Request form following the directions below:

- Expenses must be submitted within 30 days from the date of the event. Please note that any year end/June expenses need to be submitted one week after the last day of school. We will not accept any reimbursements requests after this date due to books being closed out for the year on 6/30/26.
- All original receipts or invoices must be attached to this form.
- Please keep a copy of receipts or invoices for your committee's records.
- For all payments for vendors/service providers, a check request form is required for payment directly from PTO. Parents <u>should not</u> pay vendors with their personal money and then request reimbursement unless specifically approved by the President/Treasurer ahead of the event.
- Any service providers (contractors, vendors, ASE Teachers, etc.) need to submit an
 updated W-9 form each year. This W-9 needs to be included with the check request form
 in order for the check to be processed. Please allow enough time ahead of the payment
 due date for this process. Check requests with proper documents are processed in 3
 business days.
- NJ Sales Tax Exempt Form ST-5 is available for use and valid for exemption from sales tax on all purchases (except energy and utility service), if the purchase is directly related to the organization's purposes and made with organization (not personal) funds.
- Submit the completed hardcopy form and back up documentation to: Khushboo Mittal, Treasurer, 58 Pembrooke Rd. Alternatively, a scanned copy of the completed form and back up documentation can be emailed to SBSTreasurer@chathampto.com. Please drop a text at 201-471-1601 once the check is requested.
- For any questions, please contact SBSTreasurer@chathampto.com.

CHECK REQUEST FORM 2025-2026 PTO SOUTHERN BOULEVARD SCHOOL

CHECK #	
DATE ISSUED	

Requestor Information: Date Requested		_	DATE ISSUED		
Name		Committee			
Phone #		Email Address			
Payee Information: Make Check Payable to: Amount of Check: \$				·	
Check (or write in) the PTO Commit	tee or Acco	ount to be charged:			
☐ 2 nd Grade Celebrations - 531302	☐ Field D	ay – 520300	☐ PTO Supplies	s – 524303	
☐ 2 nd Grade Memory Book - 531301 ☐ Fund Ma		/lagnets – 510310	☐ School Gifts - 533300		
☐ ASE Expenses - 515300	☐ Field Trips – 516300		☐ Spirit Wear -	☐ Spirit Wear -501302	
☐ ASE Supplies – 515300S	☐ Garden Beautification - 501311		☐ Staff Apprec	☐ Staff Appreciation – 534300	
☐ Assemblies – 517300	☐ Harvest Night – 501307		☐ STEM aftern	☐ STEM afternoon - 519305	
☐ Author's Day – 518300	☐ Holiday Boutique – 501301		☐ Student Assi	☐ Student Assistance - 550301	
☐ Book Fair – 515302	☐ HOPE Week -531602		☐ Sunshine - 5	☐ Sunshine - 525300	
☐ Class Parties – 526000	☐ I Love 1	to Read – 518306	☐ Other:	☐ Other:	
☐ Earth Day/ Green Team - 519303	☐ Mileage Club – 515305				
☐ Family Fun Night 1 st – 519302B	☐ Kindness Matters T-Shirts – 519300		300		
☐ Family Fun Night K – 519302A	☐ New/K Family Welcome – 522300		00		
☐ Family Fun Night 2 nd — 519302C	☐ PTO Ye	ar End Breakfast - 524302	2		
Completed Check should be (Circle Of 1. Picked up from the Treasurer's Home 2. Mailed to: Name Address	ne (58 Pemb	•		-	
PTO Expense Information:					
DATE VENDOR		PURPOSE/DESCRIPTION	DN	AMOUNT	
			TOTAL EVERNISES	l c	
			TOTAL EXPENSES	>	

All expenses must be approved by a PTO Board Member or Committee Head.