

# CHECK REQUEST FORM 2022-2023

## PTO SOUTHERN BOULEVARD SCHOOL

CHECK # \_\_\_\_\_

DATE ISSUED \_\_\_\_\_

All committee chairpersons and committee members seeking reimbursement for approved budget expenses must complete this form following the directions below. NJ Sales Tax Exempt Form ST-5 is available for use.

**Expenses must be submitted within 30 days from the date of the event.**

**Reminders:**

1. All original receipts or invoices must be attached to this form.
2. Please keep a copy of receipts or invoices for your committee's records.
3. Submit completed form to: Jessica Kelly, Treasurer, via the PTO Mailbox in the office at SBS, or drop off at 1 Warwick Road. For any questions, please contact [SBSTreasurer@chathampto.com](mailto:SBSTreasurer@chathampto.com).

**Requestor Information:**

Date Requested \_\_\_\_\_ Name \_\_\_\_\_

Phone # \_\_\_\_\_ Address \_\_\_\_\_

Email Address \_\_\_\_\_

**Payee Information:**

Make Check Payable to: \_\_\_\_\_

Amount of Check: \$ \_\_\_\_\_

**Check (or write in) the PTO Committee or Account to be charged:**

<input type="checkbox"/> 3 <sup>rd</sup> Grade Musical - 531300	<input type="checkbox"/> Family Fun Night K/1 <sup>st</sup> – 519302A	<input type="checkbox"/> New Family Welcome – 522300
<input type="checkbox"/> 3rd Grade Memory Book - 531301	<input type="checkbox"/> Family Fun Night 2 <sup>nd</sup> /3 <sup>rd</sup> – 519302B	<input type="checkbox"/> School Gifts - 533300
<input type="checkbox"/> 3rd Grade Breakfast - 531302	<input type="checkbox"/> Field Day – 520300	<input type="checkbox"/> Spiritwear -501302
<input type="checkbox"/> ASE Expenses - 515300	<input type="checkbox"/> Field Trips – 516300	<input type="checkbox"/> Spirit/Sunshine - 525300
<input type="checkbox"/> ASE Supplies – 515300S	<input type="checkbox"/> Garden Beautification - 501311	<input type="checkbox"/> Spring Event – 510300
<input type="checkbox"/> Assemblies – 517300	<input type="checkbox"/> Harvest Night – 501307	<input type="checkbox"/> Staff Appreciation – 534300
<input type="checkbox"/> Author's Day – 518300	<input type="checkbox"/> Holiday Boutique – 501301	<input type="checkbox"/> Sunshine - 525300
<input type="checkbox"/> Book Fair – 515302	<input type="checkbox"/> Hospitality – 527300	<input type="checkbox"/> Working Moms Events – 527301
<input type="checkbox"/> Comm Service/HOPE Week -531602	<input type="checkbox"/> K Graduation Celebration - 531603	<input type="checkbox"/> Other:
<input type="checkbox"/> Earth Day - 519303	<input type="checkbox"/> Mileage Club – 515305	

**Completed Check should be (Circle One):**

1. Placed in PTO Mailbox
2. Picked up from the Treasurer's Home (1 Warwick Road)
3. Mailed to: Name \_\_\_\_\_  
Address \_\_\_\_\_

**PTO Expense Information:**

DATE	VENDOR	PURPOSE/DESCRIPTION	AMOUNT
TOTAL EXPENSES			\$

Approved by: \_\_\_\_\_

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