

Randolph Middle School PTO - Check Request

Date: _____

Check Amount: _____

Event/Reason for Check : _____

Budget Category (if known): _____

Requested by: _____ Email or Phone #: _____

Made payable to: _____

Delivery Options

- Mail check directly to the address indicated on the invoice
- Staff mailbox: _____
- PTA Mailbox: _____
- Other: _____

Approved by: _____

Must be approved by PTO President or President Elect

Form Notes:
*Receipts or invoices must be attached for reimbursement
*Please allow 5-7 school days for processing
***Please limit each form to ONE Budget Category**

For Treasurer Use Only: Check Number _____

Check Date _____

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