South Middleton PTO CHECK REQUEST FORM

To be used for items already budgeted or pre-approved and purchased or request purchase with SMPTO debit card.

Date:	-		
Payable to:			
tem(s) or service purchased or requested to be p	ourchased with PTO deb	it card:	
Purpose for purchase (budget line item):			
Fotal amount to be paid: \$			
PLEASE ATTACH A RECEIPT WITH THIS VOUC WILL NOT BE PAID. Please give this voucher scan a receipt and this voucher and send to	to the treasurer for p		
f you request a check mailed to you in lieu o	of pick up or drop off,	please indicate return address:	
For Treasurer's use:			
Check Number	Amount \$	Date	-
Chack given to:			