Suffield Elementary PTO

Check Request

Requestor Information:

Name:

Phone:

Email:

Check Information:

Date check is needed:

Check payable to:

Amount:

Reason for check (enrichment; grant; fundraiser, etc.)

Address of Payee (or indicate if address is listed on the bill attached)

**Attach the copy of the invoice / bill to the request*

Submit directly to PTO Accounts Payable:

Lauren Brown (laurengbrown1@gmail.com)

AP Use Only:

Check Number:

Date Processed:

Notes: