

Check Request

Liberty Pines Academy PTO

Check Payable To:

Submission Date:

If this is a bill that needs to be paid, attach the bill to this form and the Treasurer will mail it.

Address of Payee (if no bill attached):

Amount:

Project/Committee:

\$ _____

Reason for Check:

Submitted By:

Phone Number:

Approved By:

Date of Approval:

Committee Chair

Executive Board Member

FOR TREASURER USE ONLY

Budget Category: _____

Date Paid: _____ Check Number: _____ Posted Date: _____

****Please make a copy for your records****