

SKOKIE WASHBURNE PTO 2020-2021 CHECK REQUEST

Please complete Check Request clearly indicating to whom the check should be made payable (vendor or committee member for reimbursement). Send the Check Request with vendor invoices, contracts and/or receipts within 30 days after the event to **Kymm Junker, PTO Treasurer, 484 Elder Lane**. Payment/reimbursement will be made only on receipt of final invoice or sales receipts. Remember to use the tax exemption letter when making purchases because as a tax-exempt organization we cannot reimburse sales tax. If you have any questions, please contact Kymm Junker at **312-404-9456** or thejunkers@me.com. Thank you!

Committee Name _____

PTO Activity/Event _____

Submitted By _____

Make Check Payable to _____

Send check to _____

Address _____

Date Submitted _____

Phone # _____

Amount \$ _____

Payment due date _____

DESCRIPTION OF PRODUCT OR SERVICE

QUANTITY	DESCRIPTION	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Invoices Attached _____ TOTAL AMOUNT \$ _____

Committee Chair Signature _____

PTO Co-Chair Signature _____

PTO Treasurer Signature _____

Account: _____ Check # _____ Date: _____ Amount _____