



RIVER TRAIL PTO

Check Request Form

PERSON REQUESTING	EMAIL	DATE SUBMITTED
MAKE CHECK PAYABLE TO	BUDGET LINE ITEM TO BE CHARGED	EXPLANATION OF EXPENSES

DATE	VENDOR	DESCRIPTION	AMOUNT
TOTAL			

Please choose how to receive your reimbursement:

PTO MAILBOX	MAIL CHECK TO ADDRESS:	OTHER
Signature of requestor		
VP or President Authorization		

Obtain VP approval prior to submitting a voucher to the Treasurer.

No unapproved expenses will be paid.

OFFICE USE - DO NOT WRITE IN THIS BOX	
Captured	
Date Paid	
Check number	