

Harrington Hartford School PTO

Check Request

1. Please attach **ORIGINAL RECEIPTS** or **ORIGINAL INVOICES** to the check request form.
2. Please provide the Harrington Hartford School PTO Tax Exempt Number 22-471108 to all vendors so that no tax will be charged.
3. Please make request to Treasurer 7 days prior to event.

Name of Fundraiser or Event: _____

Requested By: _____ Phone: _____

Date Requested: _____ Date Needed: _____

Amount Requested: \$ _____

Make Check Payable to: _____

Address of Payee (if not on bill)

Reason for Check: _____

Your Signature: _____

For Treasurer's Use Only

Check #: _____ Dated: _____ Logged: _____
