

MJHS PTO Check Request/ Reimbursement Request

Please complete and e-mail (along with pictures of all receipts) to: kwolujewicz@hotmail.com

Date _____

Requested By _____

Phone # _____

Committee _____

Date Needed _____

Check Payee _____

Address _____

Check Amount _____

Description of Expenditure _____

For Completion by Treasurer

Date _____

Check # _____

Amount _____