



## All Saints PTO Check Request Form

Date:

Amount Requested:

Payable to:

Address:

Phone:

Email:

PTO Committee:

Purpose of Expenditure:

For reimbursement, please mail this form with receipts to the following address; send it to the school office c/o Rebecca Keating PTO, or email them to [rrkeating@gmail.com](mailto:rrkeating@gmail.com).

Rebecca Keating  
8832 Sandymar  
Cincinnati, Ohio 45242  
(513) 460-4735

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**For Treasurer Use Only:**

**Check Issued on:**

**Check #:**

**Amount:**

**GL Code:**

**By:**