Check Request Form 2026-2027 Procedures

All committee chairpersons and committee members seeking reimbursement for approved budget expenses must complete the Check Request form following the directions below:

- **Expenses must be submitted within 30 days from the date of the event. Please note that any year end/June expenses need to be submitted one week after the last day of school. We will not accept any reimbursements requests after this date due to books being closed out for the year on 6/30/27.**
- All original receipts or invoices must be attached to this form.
- Please keep a copy of receipts or invoices for your committee's records.
- For all payments for vendors/service providers, a check request form is required for payment directly from PTO. Parents **should not** pay vendors with their personal money and then request reimbursement unless specifically approved by the President/Treasurer ahead of the event.
- Any service providers (contractors, vendors, ASE Teachers, etc.) need to submit an updated W-9 form each year. This W-9 needs to be included with the check request form in order for the check to be processed. Please allow enough time ahead of the payment due date for this process. Check requests with proper documents are processed in 3 business days.
- NJ Sales Tax Exempt Form ST-5 is available for use and valid for exemption from sales tax on all purchases (except energy and utility service), if the purchase is directly related to the organization's purposes and made with organization (not personal) funds.
- Submit the completed hardcopy form and back up documentation to: Jackie Milliken, Treasurer, 99 Westminster Road. Alternatively, a scanned copy of the completed form and back up documentation can be emailed to SBSTreasurer@chathampto.com. Please drop a text at 973-769-2321 once the check is requested.
- For any questions, please contact SBSTreasurer@chathampto.com.

Check Request Form 2026-2027

PTO Southern Boulevard School

CHECK #_____

DATE ISSUED_____

Requestor Information:

Date Requested _____

Name _____ Committee _____

Phone # _____ Email Address_____

Payee Information:

Make Check Payable to: _____

Amount of Check: $_____

Check (or write in) the PTO Committee or Account to be charged:

☐ 2nd Grade Celebrations - 531302	☐ Field Day – 520300	☐ PTO Supplies – 524303
☐ 2nd Grade Memory Book - 531301	☐ Fund Magnets – 510310	☐ School Gifts - 533300
☐ ASE Expenses - 515300	☐ Field Trips – 516300	☐ Spirit Wear -501302
☐ ASE Supplies – 515300S	☐ Garden Beautification - 501311	☐ Staff Appreciation – 534300
☐ Assemblies – 517300	☐ Harvest Night – 501307	☐ STEM afternoon - 519305
☐ Author's Day – 518300	☐ Holiday Boutique – 501301	☐ Student Assistance - 550301
☐ Book Fair – 515302	☐ HOPE Week -531602	☐ Sunshine - 525300
☐ Class Parties – 526000	☐ I Love to Read – 518306	☐ Other:
☐ Earth Day/ Green Team - 519303	☐ Mileage Club – 515305	
☐ Family Fun Night 1st– 519302B	☐ Kindness Matters T-Shirts – 519300	
☐ Family Fun Night K – 519302A	☐ New/K Family Welcome – 522300	
☐ Family Fun Night 2nd– 519302C	☐ PTO Year End Breakfast - 524302	

Completed Check should be (Circle One):

1. Picked up from the Treasurer's Home (99 Westminster Road)
2. Mailed to: Name_____

   Address_____

PTO Expense Information:

DATE VENDOR	PURPOSE/DESCRIPTION	AMOUNT

	TOTAL EXPENSES	$

Approved by: _____

All expenses must be approved by a PTO Board Member or Committee Head.