

# Check Request

St. Cloud Elementary School PTA  
West Orange, NJ 07052

*\*NOTE: This form must be sent to both the PTA President and Treasurer at the email addresses noted below. All requests will be handled within 5 days.*

*Jennifer Craine (President) [president@stcloudpta.org](mailto:president@stcloudpta.org)*

*Bill Byrne/Stefano Grottoli (Treasurer) [treasurer@stcloudpta.org](mailto:treasurer@stcloudpta.org)*

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AMOUNT: \$ \_\_\_\_\_

PAYABLE TO: \_\_\_\_\_

EXPENSE DESCRIPTION: \_\_\_\_\_  
\_\_\_\_\_

EVENT/EXPENSE: \_\_\_\_\_

DATE NEEDED: \_\_\_\_\_

CHECK TO BE SENT TO (provide address or other contact info):  
\_\_\_\_\_  
\_\_\_\_\_

REQUESTED BY: \_\_\_\_\_

DATE OF REQUEST: \_\_\_\_\_

FINAL RECEIPT/CONTRACT ATTACHED: YES \_\_\_\_\_ NO \_\_\_\_\_

Treasurer's Initials \_\_\_\_\_

President's Initials \_\_\_\_\_

Check # \_\_\_\_\_

Date Paid \_\_\_\_\_