Dover PTO
Check Request

Name:_____ Date Requested:_____

Contact (Phone/email):_____ Date Needed:_____

Check handling (complete one):

Put in _____ mailbox

Mail to _____ (provide address)

Other _____

Attach receipts, invoices contracts or other supporting documents.

Questions: contact Barbara Dawley, Treasurer at jbdawley@comcast.net

Payee	Budget Category	Date	Amount	Description	In Budget (Y/N)
	Total Amount				