

**FOOTHILL HIGH SCHOOL
Parent Teacher Organization, Inc.
Check Request Form**

Please Print Legibly

Request Date: _____

Requested by: _____

Phone: _____

Check Amount: \$ _____

Email: _____

Check Payable to: _____

Payment Due Date: _____
(if applicable)

Mail Check to: _____

Purpose: _____

Signature: _____

******PLEASE ATTACH/INCLUDE RECEIPT OR PROOF OF PAYMENT ******

Place this Form and other documents in PTO TREASURER MAILBOX (Foothill Office)

Thank you

If you have questions or the payment requires special handling, contact

**Tiffany Schwarzer, FHS PTO Treasurer
714-504-9725
fhsptotreasurer19_20@yahoo.com**

Treasurer Use Only

Check Number(s): _____ Date: _____

Budget Expense Account: _____