



**New Lenox School District 122 PTO
PTO Member - Request for a Cash Box
2018-2019**

Event: _____

Date Needed: _____ Total Amount: _____

of Cash Boxes: _____ Amount per box: _____

(with these same denominations)

Denominations: \$1: _____ \$10: _____

 \$5: _____ \$20: _____

 coin: _____

Person Requesting: _____ Date: _____

Advisory Group: _____

Approved By: _____

Must Be Advisory Group Chair

Please complete this form, sign and turn in to PTO Treasurer one week prior to event.



**New Lenox School District 122 PTO
PTO Member - Request for a Cash Box
2018-2019**

Event: _____

Date Needed: _____ Total Amount: _____

of Cash Boxes: _____ Amount per box: _____

(with these same denominations)

Denominations: \$1: _____ \$10: _____

 \$5: _____ \$20: _____

 coin: _____

Person Requesting: _____ Date: _____

Advisory Group: _____

Approved By: _____

Must Be Advisory Group Chair

Please complete this form, sign and turn in to PTO Treasurer one week prior to event.