

# Check Request Form

---

Date: \_\_\_\_\_ Budget/Program Name: \_\_\_\_\_

Pay to: \_\_\_\_\_ Amount\*: \$ \_\_\_\_\_

Description: \_\_\_\_\_  
\_\_\_\_\_

Requester: \_\_\_\_\_

Name

Signature

\_\_\_\_\_  
Contact info (phone or e-mail)

Mail/Deliver to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Instructions: Please complete this form, attach invoices, receipts or supporting documents to the back and place it in the PTA Treasurer mailbox for processing. Check requests must be submitted by June 20<sup>th</sup>, for any given school year.*

*\*Amounts not included in the approved PTA budget require approval; therefore there will be a delay in processing and payment is not guaranteed.*

---

*This section for Treasurers use only*

Attach copy of check here:

Budget verified by: \_\_\_\_\_ Date: \_\_\_\_\_