



Arroyo Elementary

Arroyo PTA Check Request

*****PLEASE COMPLETE FORM IN ITS ENTIRETY**



NOTE: In order to be reimbursed, amount requested **MUST** be accompanied by a receipt, invoice, or acceptable supporting documentation. Non-compliant requests will be returned unpaid.

Tangible items purchased with PTA funds are the property of the PTA. All such items will remain readily accessible and inventoried. PTA property shall not remain off campus for more than 2 consecutive days.

Section 1. Description of Expense:

Person Requesting Check : _____

Budget Category: _____

Purpose of Expense: _____

Payee: _____

Date of Request: _____ Amount: _____

Section 2. Spring Fundraiser and Carnival Expenses **MUST** receive prior Committee Chair Approval. Check will not be cut without Committee Chair consent.

To be filled out by Committee Chairs **ONLY**:

Name: _____ Initials: _____ Date: _____

Section 3. Check will be placed in your inbox unless otherwise noted.

Mail the check to the Payee listed above at the following address:

Street: _____ City: _____

State: _____ Zip Code: _____ Attn: _____

Please give my check to my committee chair: _____

Name/ Position

Please leave my check with the office Secretary and I will pick up.

Office Use Only:

Date Paid: _____ Check # _____ Amount Paid: _____

Processed By: _____

PTA Treasurer

1st Approval: _____

PTA President

2nd Approval: _____

PTA Secretary