

LEA HILL ELEMENTARY PTA - CHECK REQUEST FORM

(Request for Reimbursement)

Please complete the top portion of this form, securely attach your receipt(s), and place in the PTA mailbox located in the school's office. If you are submitting receipts for more than one committee, please complete a *separate* form for each committee. (Checks will NOT be issued without a Check Request and the appropriate receipts. Thank you.

Date: _____ Committee: _____ Requested By: _____

Check Payable to: _____ Amount: \$ _____

Address: _____

Explanation: _____

Authorized
Signature(s): _____

Phone: _____

Phone: _____

For Treasurer's Use Only

Check No.: _____ Payable to: _____

Date: _____ Amount: \$ _____ Income (I) or Expense (E): _____

Budget Category: _____ Line Item No. (I or E, -0): _____

Annual Budget: \$ _____ Balance Remaining: \$ _____

Notes/Comments: _____

Check Signed By (circle positions): President Vice-President Secretary Treasurer

Treasurer's Signature: _____ Date Recorded: _____