

Providence Spring Elementary

PTA Check Request Form

Payee: _____ Amount: \$ _____

Request Date: _____ Date Needed: _____

Reason for Expense: _____

Please attach invoices, receipts and/or copies of any contracts

Chairperson Signature: _____ Committee/Account: _____

Approval of Request: _____

(PTA President or President –Elect)

Disposition of Check:

_____ send home with _____
(please include teacher and grade level)

_____ Leave in PTA envelope

_____ mail to: _____

_____ Other: _____

For Treasurer Use:

Date: _____

Check #: _____

Amount: _____

Account: _____

Sent: _____