

WILSON CREEK ELEMENTARY PTA Check Request Form

Prior to submitting this form, obtain approval from your committee's Vice President. Put this COMPLETED form in the Treasurer's box in the PTA Office. Your check will be delivered to the committee mailbox in the PTA room.

- Checks will only be written from the PTA to individuals if you **attach paid receipts** to this request form (credit card receipts or cash register).
- For payment to be made directly to a vendor, **attach the invoice(s)**. *Contact the PTA Treasurer at least 5 business days in advance of the date payment to a vendor is required.*

Requestor: _____ Phone: _____ Date: _____

Check payable to: _____ Budget Line Item: _____

Return to Requestor via Committee Mailbox in PTA Room

Mail to Address: _____
(Vendors Only) _____

I have reviewed the above request and confirm the attached receipts equal the Amount Requested. Any discrepancies will be addressed with the Requestor prior to submission for reimbursement.

VP Approval (signature): _____ **Date:** _____

Invoice/ Purchase Date	Vendor	Description	Total	Receipt Attached
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
Check Total:				

PTA President Approval (signature): _____ **Date:** _____

<i>For Treasurer's Use Only</i>				
Check Issued	Date	Budget Line Item	Amount	Check #
<input type="checkbox"/> Yes <input type="checkbox"/> No				
G/L Entry Date:				
Comments:				