

MES PTA CHECK REQUEST - FUNDED BY PTA



Date of request: _____

Pay to:	_____
Address:	_____ _____

Submitted by:	_____
Contact Phone:	_____
Email:	_____

Budget Line Item #	Description	Pupose of Expenditure	Amount
Total			

Signature of Person Requesting: _____

Notes: Please attach receipt or invoice (credit card statements will not be accepted in place of invoices).
 Please place in Treasurer red lockbox in MES Office.
 Checks will be mailed or placed in teacher mailbox within two weeks of receiving completed request.

For Treasurer Use Only:			
Approved by Treasurer	Date	Approved by President	Date
Comments: _____ _____			
Date Received: _____		Issued Check #: _____	