

MES PTA CHECK REQUEST - FUNDED BY PTA



Date: _____

Vendor Inv Num: _____
(attach vendor invoice)

QB Reference Number: _____
(PTA Treasurer Use Only)

| | |
|--|-------|
| Pay to: | _____ |
| Address: | _____ |
| <small>Complete all information (Full name and address required)</small> | |

| | |
|---|--|
| Submitted by: | _____ |
| | <small>(Name of Person Requesting)</small> |
| Contact Phone: | _____ |
| Email: | _____ |
| <small>Complete all Information</small> | |

On your receipt please number and circle the items you are requesting funds for
 Please total the dollar amount for all of your items for each receipt on the below lines

| Expense Code | Budget Category Description | Pupose of Expenditure | Amount |
|--------------|--------------------------------|-----------------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total | | | |

Signature of Person Requesting: _____ (Signature of the name above and different from the signature of approval.)

Approved by VP _____ **Date** _____

Approved by Co-President _____ **Date** _____

Note: Please attach receipt or invoice and sign the form before submitting.
 Please obtain approval signature from President or Executive Committee (required before Treasurer will issue check).
 Please place in Treasurer mailbox in MES Office.
 Checks will be mailed or placed in teacher mailbox within two weeks of receiving completed request.

| | |
|--------------------------------|-------------------------|
| For Treasurer Use Only: | |
| Comments: | _____ |
| | _____ |
| Date Received: | Signature: _____ |