

--Attach receipts here--



CHECK REQUEST FORM

Supporting receipts/invoices MUST be attached. Failure to attach receipts/invoices may result in purchaser having to incur expenses. Questions? Email-Treasurer@NFCPTA.com

Your Name: \_\_\_\_\_

Check Payable to: \_\_\_\_\_

Email Address: \_\_\_\_\_

Explanation of Expenses: \_\_\_\_\_

Table with 4 columns: Date, Vendor, Description, Amount. Contains 4 empty rows for data entry.

Total Amount: \$ \_\_\_\_\_

\_\_\_\_\_ Mail check to (address) \_\_\_\_\_

\_\_\_\_\_ Other (explain) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

NOTICE: Approval must be obtained on all purchases. Signature of a PTA President is required before Treasurer will issue check.

President's Authorization: \_\_\_\_\_ Date: \_\_\_\_\_

FOR TREASURER'S USE (do not write below this line)

Treasurer's Verification: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Check #: \_\_\_\_\_ Check Amount: \_\_\_\_\_

Quicken: \_\_\_\_\_ Budget Category: \_\_\_\_\_

Notes: \_\_\_\_\_