

# PTA Funds Check Request

To: PES PTA Treasurer

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

From: \_\_\_\_\_ Grade: \_\_\_\_\_ Room: \_\_\_\_\_

Make Payable to: \_\_\_\_\_ Amount Requested: \$ \_\_\_\_\_  
(Please attach receipt if applicable)

Funds needed for: \_\_\_\_\_

Date needed: \_\_\_\_\_ (Allow one week for processing!)

Account to be charged: \_\_\_\_\_ \$ \$

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*Please submit all requests to the PTA mailbox\*\*\*

Thank you!



Budgeted \_\_\_\_\_

Approval Required \_\_\_\_\_