

**Old Farmers Road School PTA
Check Request Form 2018-2019**

This voucher must be submitted to the PTA treasurer along with **original receipt(s) or invoice/order form** attached. Photocopies will not be accepted. Exceptions to this must be approved by the treasurer prior to submission of this check request.

CHECK REQUEST ONLY

Date _____

Requested by _____

Signature of Requestor _____

Amount: \$ _____

Payable to: (Name) _____

Address _____

If not being mailed, to whom or where does the check go?

Reason for
Check: _____

Budget Category _____

Authorized by (President's Signature) _____

**Return form along with original receipt(s) to PTA Mailbox -
ATTN: PTA TREASURER**

Do not write below this line - Internal Use Only



Check # _____ Date: _____

Signature _____