

Bloomingtondale PTA
Check Request Form
2011/2012 School Year

Amount: \$ _____ Date: _____

Payable To: _____

Address: _____

Reason for Disbursement: _____

Requested By: _____
Signature acknowledges receipt of goods or services on behalf of the Bloomingtondale PTA

To Be Completed by PTA Executive Board:

Budget Category: _____

Check #: _____ Date: _____

Approvals:

Name Date

Name Date

This expense voucher must be submitted to the PTA Treasurer within 30 days of the expense and must have receipts, invoices or order forms attached.