



PTA Check Request Form

Name of Person Requesting Check: _____

PTA Position or Northwood Job Title: _____

Today's Date: _____

_____ Reimbursement (staple receipt to back of this form)

_____ Pre-Issue Check (please provide invoice/receipt with request, or immediately upon receipt)

Amount Requested: _____

Purpose of Check:

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total: \$ _____

Write Check To: _____

Should check be mailed? _____ (if so, please write in address below)

Name of Person/Company: _____
(only if not listed on attached invoice)

Address: _____
(if not complete, check will be delayed)

City State Zip

Signature _____

Date _____

for PTA Purposes Only

PTA President

Date: _____

Signature: _____

PTA Secretary

Date: _____

Signature: _____

PTA Treasurer

Date: _____

Signature: _____

Budget Category _____

Minutes Date: _____

Check #: _____