

Eliot PTA Check Request

**To be completed and signed by the person requesting a
check for reimbursement of payment.**

Date of check request: _____

Fundraiser or event: _____

Make check payable to: **Description or reason:** **Amount:**

Signature of person requesting check(s):

_____ Phone # _____

Email: _____

Please attach receipts and place request form in the PTA Treasurer's mailbox.
Thank you!

Treasurer's use:

Date: **Check #:** **Budget Item:** **Amount:**
