

## MEADOW PARK PTA REQUEST FOR REIMBURSEMENT OR PAYMENT

**INSTRUCTIONS:** Complete in blue/black ink. Attach receipts or purchase orders to the back of this form. Make a copy for your records. Place form in the PTA Treasurer's mailbox.

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Amount of Check: \$ \_\_\_\_\_

Make Check Payable to: \_\_\_\_\_

Requested by: \_\_\_\_\_

Return check to: \_\_\_\_\_ Person requesting check \_\_\_\_\_ Mail in the attached envelope

Notes: \_\_\_\_\_

**REASON FOR REQUESTING CHECK:**

**Budget Category:**

\_\_\_ **Fundraising Event:**

- |                       |                       |                   |
|-----------------------|-----------------------|-------------------|
| ___ Jog-A-Thon        | ___ Gift Wrap         | ___ T-Shirt Sales |
| ___ Ice Cream Social  | ___ Pie Sales         |                   |
| ___ Corporate Program | ___ Pancake Breakfast | ___ Other: _____  |

\_\_\_ **Support Programs:**

- |                             |                            |                           |
|-----------------------------|----------------------------|---------------------------|
| ___ ASSETS Supplies         | ___ Laminator Film/Service | ___ Reflections           |
| ___ Art Lessons             | ___ Library                | ___ School Beautification |
| ___ Art Supplies            | ___ Library - Book Fair    | ___ School Supplies       |
| ___ Assemblies              | ___ Mother/Daughter Tea    | ___ Science Discovery Day |
| ___ Directory               | ___ Meadow Park Revue      | ___ Sixth Grade Promotion |
| ___ Field Trip (Grade ____) | ___ PE Programs            | ___ Yearbook              |
| ___ Guy Stuff               | ___ Red Ribbon             | ___ Other: _____          |

\_\_\_ **PTA Operating Expense:**

- |                            |                        |                                 |
|----------------------------|------------------------|---------------------------------|
| ___ Insurance              | ___ Legislative Action | ___ Operating Expense /Supplies |
| ___ Membership/Hospitality | ___ Newsletter         |                                 |

**Cash Advance:**

If you received a cash advance, identify amount received: \$ \_\_\_\_\_  
 Deduct the total amount of receipts attached: \$ \_\_\_\_\_  
 Balance returned to PTA on \_\_\_\_\_ \$ \_\_\_\_\_

Date Approved: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Check No. \_\_\_\_\_

**SIGNATURES: (Two required)**

\_\_\_\_\_  
President

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Treasurer