



CHECK REQUEST FORM

PLEASE COMPLETE ALL FIELDS:

Submitted by: _____

Date Submitted: _____

E-mail: _____

PTA Committee/Budget Item: _____

Description of Purchases: _____

Please note: The MES PTA is tax-exempt; please use our tax-exempt form when possible!

Make Check Payable To: _____

Check Amount: \$ _____

Mail Check To: _____

(Optional) SPECIAL INSTRUCTIONS: _____

Requestor's Signature: _____

*I certify that all purchases for which I am seeking reimbursement
have been approved by an MES PTA Board Member.*

Please scan and email this form along with your receipts/invoices to the Treasurer -OR-
leave a hard copy of this form with stapled receipts/invoices in the Treasurer's PTA mailbox.

Please allow ample time - *3 day minimum* - from date of receipt for processing.

TREASURER USE ONLY

Check # _____

Date _____