

Example Funds Request Form

Check # _____

_____ PTA Funds Request Form
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PAYEE SUMMARY

Payable to _____ Date Requested _____

Address _____ Phone _____

Requestor _____ Date Needed _____

Budget Category(s) to be Charged & Corresponding Amount(s)

Budget Category	Amount	Budget Category	Amount
	\$		\$
	\$		\$

PURCHASE SUMMARY

Item Purchased	Place of Purchase	Amount
		\$
		\$
		\$
		\$
		\$
TOTAL		\$

Receipts and/or invoices must be attached. A sales tax exemption form should be used when feasible.

CHECK DELIVERY INFORMATION

Please indicate where you would like this check sent or how you would like to receive it:	
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APPROVALS

Committee Chair's Signature _____ Date _____

Treasurer's Signature _____ Date _____

2nd Signer's Signature (if Standing Rules require 2 signatures) _____ Date _____

FOR TREASURER'S USE ONLY

Receipt/Invoice Date		Date Paid	
Date Received		Payment Method	
Plan of Work/Motion		Total Payment	\$

