

## **Check Request Form**

Use this form to receive reimbursement from the PTA or to have payment sent directly to a vendor.

Please complete this form and attach all receipts or invoices. If the invoice needs to be mailed, you need to submit the original and a copy of the invoice. You will need to sign the invoice stating that you agree with the charges on it. Return this form with the relevant documents to the PTA Treasurer's mail box in the office, to the attention of the PTA Treasurer. If you have any questions please feel free to contact me at treasurer@oaktonpta.net

Requestor's Name:	Date of Request:	
Make check payable to:		
Amount of check: \$	Date Check Must be paid by:	
List of receipts: (ex: <u>Target \$10.00</u> )		_
Amount	Reason/Category (ex: Spring Picn	ic)
Signature of Requestor		
Please send check:		
by backpack; Child's name, teacher & grade		
to my PTA or School office mailbox.		
to my 1 111 of School office manoox.	For treasurer's use only.  Check #:	
	Check Date:	
	Category:	