



Evergreen PTA

Check/Reimbursement Request

Attach receipts or invoices to this completed form. This helps the treasurer keep accurate account information for budget line items and prevent problems in the case of an audit.

CHECKS WILL NOT BE WRITTEN WITHOUT PROPER DOCUMENTATION.

Date of Request: _____

Date of Purchase: _____

PTA Program/Event: _____

Description of Purchase: _____

Total Cost of Item(s): _____

Make check payable to: _____

Address if check to be mailed: _____

Requested by (Please Print): _____

Signature: _____

Phone Number: _____

For Treasurer's Use Only:

Check Amount: _____ Check Number: _____ Budget Line Item: _____

Distributed to: _____ Date: _____