

**Inman**  
**PTA** CHECK REQUEST FORM

**Requested By:** \_\_\_\_\_ (name) **Date:** \_\_\_\_\_  
 Put in PTA box \_\_\_\_\_ (phone)  
 Mail check \_\_\_\_\_

*If a check is needed by a specific date for an event etc., please email  
**InmanPTAtreas@gmail.com.***

**School Store (select one):**  
 Counselor Request  
 Principal Request  
 PTA President Request

**Treasurer:**  
 Check Number: \_\_\_\_\_  
 Journal Entry Date: \_\_\_\_\_

Budget Item	Description	Amount
		\$
		\$
		\$
		\$
		\$
<b>Total Check Amount</b>		<b>\$</b>

**Pay To:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
 \_\_\_\_\_  
**Contact:** \_\_\_\_\_  
**Tel:** \_\_\_\_\_

**APPROVAL** (treasurer will not issue a check without this approval)

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_

- NOTES:**
- If the item(s) has already been purchased, attach receipt. Otherwise, attach an invoice to be paid to vendor.
  - Use one form to request one check per vendor or individual.
  - Check request(s) must be approved by the PTA President, VP or Committee Chair before the Treasurer can issue a check. No exceptions.