

## MARSHALL ROAD ELEMENTARY SCHOOL PTA CHECK REQUEST FORM

<u>Instructions</u>: Please use this form when requesting payment from the MRES PTA for any activities (either for reimbursement or to pay a vendor directly). Please attach related receipts or invoices and explain the type of expense and/or the associated committee (i.e. ice cream social, teacher appreciation week, book fair, etc). Payment requests that are submitted without this form completed may be delayed until complete information is received. To submit this form, drop the completed form with appropriate attachments off in the school office or contact the MRES PTA treasurer at: <a href="mailto:treasurer@marshallroadpta.org">treasurer@marshallroadpta.org</a>.

Today's Date:   Check Requested By:			
Contact phone number:  Make Check Payable to:  Amount of the Check:  Due Date for the Check:  Explanation of the expense:  Completed/Signed Check should be (select one):  Mailed to payee at the following address:  Mailed to payee at the following address:  Date of Check:  Date of Check:  Amount:  Mailed to payee at the following address:  If so, reason and amount of adjustment:  Amount:  Amount:  Mailed to payee at the following address:  Adjustments needed (Y/N).  If so, reason and amount of adjustment:	Today's Date:		
Make Check Payable to: Amount of the Check:  Due Date for the Check:  Explanation of the expense:  Completed/Signed Check should be (select one):    Returned to requisitioner for distribution (select one):   Mailed to payee at the following address:   Mailed to payee at the following address:   Date of Check: Adjustments needed (Y/N). If so, reason and amount of adjustment:   Amount: Adjustments needed (Y/N). If so, reason and amount of adjustment:	Check Requested By:		
Amount of the Check:  Due Date for the Check:  Explanation of the expense:  Completed/Signed Check should be (select one):    Returned to requisitioner for distribution (mailed to payee at the following address:	Contact phone number:		
Explanation of the expense:  Completed/Signed Check should be (select one):    Returned to requisitioner for distribution   Mailed to payee at the following address:	·		
Explanation of the expense:  Completed/Signed Check should be (select one):    Returned to requisitioner for distribution   Mailed to payee at the following address:   Mailed to payee at the following address:   Adjustments needed (Y/N).   If so, reason and amount of adjustment: Amount:   Amount:	Amount of the Check:		
Completed/Signed Check should be (select one):    Returned to requisitioner for distribution   Mailed to payee at the following address:	Due Date for the Check:		
Completed/Signed Check should be (select one):    Returned to requisitioner for distribution   Mailed to payee at the following address:			
(select one):    Mailed to payee at the following address:	Explanation of the expense:		
For Treasurer's Use Only:  Check number: Adjustments needed (Y/N).  Date of Check: If so, reason and amount of adjustment:  Amount:		·	
Check number: Adjustments needed (Y/N).  Date of Check: If so, reason and amount of adjustment:  Amount:	(Sciect offe).	Walled to payee at the following address.	
Check number: Adjustments needed (Y/N).  Date of Check: If so, reason and amount of adjustment:  Amount:			
Check number: Adjustments needed (Y/N).  Date of Check: If so, reason and amount of adjustment:  Amount:			
Check number: Adjustments needed (Y/N).  Date of Check: If so, reason and amount of adjustment:  Amount:			
Date of Check: If so, reason and amount of adjustment:  Amount:	For Treasurer's Use Only:		
Amount:	Check number:	Adjustments needed (Y/N).	
	Date of Check:	If so, reason and amount of adjustment:	
G/L Reference:	Amount:		
	G/L Reference:		

Revision: 2/2018