

# south pasadena middle school pta

## REQUEST FOR PAYMENT

Complete this form, attach receipts or invoice, and then place in the PTA mailbox in the Teacher's Lounge.

<b>CHECK PAYABLE TO:</b>	<b>REQUESTED BY:</b>
Name: _____	Committee: _____
Address: _____	Event Title: _____
City/State/Zip: _____	Date(s) of Event: _____
Phone: _____	Contact Name: _____
Email: _____	Contact Phone: _____
	Contact Email: _____
	Signature: _____
<b><i>All checks will be mailed unless otherwise requested.</i></b>	

GIVE A DESCRIPTION OF ITEM, EVENT or LOCATION. ATTACH AN ORIGINAL RECEIPT OR INVOICE, TAPED TO AN 8 1/2" x 11" PAGE.			
Description:	Quantity	Unit Cost	Total Cost
		<b>SUBTOTAL</b>	
		<b>TAX</b>	
		<b>TOTAL</b>	

<b>PTA OFFICERS' APPROVAL</b>	<b>PTA TREASURER DATA ENTRY</b>
Budget Line Item: _____	Date Entered: _____
PTA President: _____ Date: _____	Check Number: _____
PTA Treasurer: _____ Date: _____	Entered by: _____
PTA Secretary: _____ Date: _____	

\*\*No payment will be made without an attached receipt or invoice\*\*  
All receipts MUST BE taped to an 8 1/2" x 11" sheet of paper with reimbursable item(s) and amount(s) circled.