



# Check Request Country Parkway PTA

Date of request: \_\_\_\_\_

Please make check payable to: \_\_\_\_\_ (Please Print)

If check is to be mailed, please include the mailing address. Otherwise, check will be left in PTA mailbox for pickup.

Amount of Check: \$ \_\_\_\_\_ \*\*NOTE: NO TAX WILL BE REIMBURSED

Date check is needed: \_\_\_\_\_

Reason for request:

Check request made by: \_\_\_\_\_

Committee Name: \_\_\_\_\_

The following is to be completed by treasurer:

Check request approved by: \_\_\_\_\_

Check Number: \_\_\_\_\_ Date of Check: \_\_\_\_\_

Check Amount: \$ \_\_\_\_\_

**Questions regarding reimbursement? Thomas Mahoney at [tmahoney130@gmail.com](mailto:tmahoney130@gmail.com) (716) 912-8836**