

CHECK REQUEST

Date of request: _____ Requested Amount \$ _____

Requests will be paid out **TWO** times per month:

- Requests received between 2nd -13th will be paid on 15th
- Requests received between 15th-30th will be paid on the 1st
- If either payout date falls on a weekend it will be the following business day
- Please plan accordingly

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.

Check request made by: _____

Committee Name or Grade Endowment: _____

The following is to be completed by treasurer:

Check request approved by: _____

Check number: _____ Date of check: _____

Check amount: _____

Questions regarding reimbursement contact, Treasurer Thomas Mahoney at
Tmahoney130@gmail.com or (716) 912-8836