

Thomas Jefferson HS for S&T

ANGP

everychild. onevoice

FY 2022-2023

Please Provide Zelle if available

Check Request Form

Today's Date: _____ Date Check Needed: _____

Normal check processing time is up to 2 weeks

Make Check Payable To: _____

Total Expenses Incurred: _____

Total Amount Requested: _____ (*Total expenses minus amount donated*)

Reason for Check: _____

Supporting Documentation: _____

All expenses should be supported by invoice and/or receipts

Leave in school mailbox to the attention of: _____

OR Mail Check To: _____

Address: _____

Requester Name: _____ Signature: _____

Telephone / E-mail: _____

PTSA Committee Chairperson or Exec Committee Member Approval:

Name: _____ Signature: _____

PTSA Electronic Payment Signatures:

Name: _____ Signature: _____

Name: _____ Signature: _____

Please keep a copy of this Check Request Form and all receipts for your files.

Instructions: Staple this form and all invoices or receipts (either originals or photocopies) and *place* in the Treasurer's folder in the PTSA mailbox, OR *scan* a complete copy of this form and all invoices or receipts and e-mail them to treasurer@tjptsa.org

For Treasurer's Use:

Check #: _____ Amount: _____

Voucher #: _____ Account: _____

Date paid by treasurer: _____ Date mailed/delivered: _____