



Proctor School PTA

Payment Authorization Form for Proctor Staff



Today's Date: _____

Name of person requesting check: _____

Account to Charge:

➤ Classroom supplies \$ _____

➤ Field Trip Fund \$ _____

➤ Other (please specify): _____ \$ _____

Total amount requested: \$ _____

Description of Disbursement: _____

Make check payable to: _____

Special Instructions/Comments: _____

Attach invoice(s) and receipt(s) to this form to be paid.

Requests without invoice/receipt will be returned and will delay processing of reimbursement check.

Approved By:

President's Signature

Date

Secretary/Financial Secretary's Signature

Date

For PTA Treasurer's use:

☐ Membership approved activity

☐ Executive Board approved activity

☐ Funds released by membership

Budget Category:

Budgeted Amount:

Amount Paid:

Check #:

Date Paid:
