

Sequiota PTA

Request for Payment

=====

Date: _____

Amount: _____

Make Check Payable To: _____

MARK PREFERENCE: Leave in "Checks to Pick Up" Folder _____ Mail to the following address _____

Address: _____

Budget Category/Activity: _____

Notes: _____

*All receipts must be enclosed to be reimbursed unless noted in minutes or approved by executive board. Please remember SALES TAX WILL NOT be reimbursed!

Check #: _____ Check Date: _____

=====

Sequiota PTA

Request for Payment

=====

Date: _____

Amount: _____

Make Check Payable To: _____

MARK PREFERENCE: Leave in "Checks to Pick Up" Folder _____ Mail to the following address _____

Address: _____

Budget Category/Activity: _____

Notes: _____

*All receipts must be enclosed to be reimbursed unless noted in minutes or approved by executive board. Please remember SALES TAX WILL NOT be reimbursed!

Check #: _____ Check Date: _____

=====