

Yates Mill Elementary PTA Payment Request Form

Approval _____

Please attach all of your expense receipts or vendor invoices to the back of this sheet, and return it to the PTA mailbox within 30 days of expenditure.

Make check payable to:

Name
Address
Telephone Number
Requested by (Signature)

If immediate payment is required or special circumstances apply, please call the PTA Treasurer

Check One:

- Request reimbursement (attach receipts)
- Request direct payment (attach vendor invoice)
- Request advance payment (attach vendor request/ contract)

Check One:

- Mail to requestor
- Mail to vendor

Date	Vendor	Description of Expense	Amount
TOTAL Payment Requested			