North Ridge Elementary PTA CHECK REQUEST FORM

Please Print All Information		Date:		
Your Name:		Your Pho	our Phone #:	
Circle Committee Budget for	r Expenses:			
PTA General PTA Mtgs/Socials PTA Treasurer Supplies Art Book Fair Class Parents Community Links Copy Room Contrib Cultural Arts Copy Room Donuts for Dad/Muffins for Mom Student Directory Environmental Fifth Grade Program GEMS/Terrific Kids	Health Room Hospitality Membership Music Odyssey of the M Pathways PE & Super Kids Reading Incentive Reflections Safety Patrol Science Fair School Support Spirit Walk Spirit Wear Sunshine	Day	Teacher Mini Grants Teacher \$100 Gift Cer Teacher of the Year Yearbook Volunteer Tutoring Ctr Unicornucopia: Games Ticket Sales Raffle Food PTA Admin Other: ———— Other:	
Explanation of Expense (plea	se be specific)			
TOTAL Reimbursement Am	ount: \$	(Sa	ales Tax Amt: \$)	
TO WHOM SHOULD CHEC	K BE PAID?			
Name:				
Address:				
		F	Phone:	
PLEASE ATTACH ALL	RECEIPTS, INVO	line.)	•	
AUTHORIZED BY:				
Treasurer or President Signature		Date		
FOR TREASURER'S USE ONLY:				
Check Number	Date Paid			
Other Information:				