

CHECK # \_\_\_\_\_

# Hazelwood Elementary PTSA - CHECK REQUEST FORM

Requester: \_\_\_\_\_  
 Budget Charged: \_\_\_\_\_  
 Payable to: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

Select Check Delivery Method:

- Committee Folder: \_\_\_\_\_
- Teacher Box: \_\_\_\_\_
- Kidmail (Teacher/Student): \_\_\_\_\_
- Direct mail -This request must include a self-addressed, stamped envelope.

Receipt Description	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>Total Amount Requested:</b>	<b>\$ _____</b>

Original receipts,  
invoices or  
contracts must be  
attached.

Please highlight  
items to be  
reimbursed.

Questions? Email ~ [Treasurer@HazelwoodPTSA.org](mailto:Treasurer@HazelwoodPTSA.org)

Comments or Special Instructions:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR TREASURER'S USE ONLY

Date Received: \_\_\_\_\_ Check Date: \_\_\_\_\_ Budget: \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_