GHS PTSA CHECK REQUEST FORM

Fill in the information requested on the form. Staple your invoice and/or receipts to the back. Submit form to Garfield PTSA Treasurer (PTSA box in school office). Questions? Contact ghsptsatreasurer@gmail.com

Your name: ________________________________________________________________

Phone and/or email: __________________________________________________________

Amount requested: __________________________________________________________

Make check payable to: _______________________________________________________

Send check via: select method                                           For U.S. mail, provide address below:

☐ School mailbox
☐ US mail
☐ Other (type here)

__ ________________________________
Street

________________________
City State ZIP

Budget line/category/committee: ______________________________________________

Other explanation/instructions:

________________________________________________________________________

By signing this form, I acknowledge that all items and property purchased with Garfield High School PTSA funds are the property of Garfield High School.

Signature: __________________________________ Date: ________________

________________________________________

Please do not write below line—for Garfield PTSA Treasurer’s use only

Date received: __________ Date sent: __________ Treasurer’s Signature:__________________________

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