

BODKIN ELEMENTARY PTA
Check Request/Disbursement Form

Date: _____ Committee: _____

Pay to the Order of: _____

PTA Parents: Childs Name, Teacher & Grade: _____

(If school is not in session, include mailing address so check can be mailed directly to you)

Please attach ALL original receipts and/or invoices to this completed form.
Leave the form in the mailbox marked PTA TREASURER

VENDOR (One receipt per line)	DATE OF PURCHASE	DESCRIPTION (Purchase and Purpose)	AMOUNT	COMMITTEE (If multiple committees)
GRAND TOTAL			\$	

FOR PTA TREASURER'S USE ONLY

Check Number: _____ Check Amount: _____

Date Paid: _____ Category: _____