

Bailey Elementary School PTA Check Request

**IMPORTANT NOTE: Sales tax will NOT be reimbursed.
We have a tax exempt ID. Please contact treasurer if needed.**

Paid
Check No. _____
Date: _____
Amount: \$ _____
PTA Treasurer Approval _____
PTA Officer Approval _____

◆ Requestor's Name: _____

◆ Email address: _____

◆ PTA Program Name (**REQUIRED**) – use a separate form for different programs:

- | | |
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| <ul style="list-style-type: none"> <input type="checkbox"/> Accounting Expense <input type="checkbox"/> Arts & Music > Art Adventure <input type="checkbox"/> Arts & Music > Art Supplies (Art teacher) <input type="checkbox"/> Arts & Music > Music Department <input type="checkbox"/> Communication > Postage Expense <input type="checkbox"/> Communication > Printing Expense <input type="checkbox"/> Computers & Equipment > Technology Hardware <input type="checkbox"/> Computers & Equipment > Technology Subscriptions <input type="checkbox"/> Discretionary Funds > _name & grade level of staff person:
_____ <input type="checkbox"/> Enrichments > Blank Memory Books (1st grade) <input type="checkbox"/> Enrichments > COMPAS Program _____
(specify 4th, 5th or Gateway) <input type="checkbox"/> Enrichments > Geography Bee <input type="checkbox"/> Enrichments > Kindness Retreat <input type="checkbox"/> Enrichments > Project Go <input type="checkbox"/> Field Trips > _____ (specify grade level) | <ul style="list-style-type: none"> <input type="checkbox"/> Greening Committee <input type="checkbox"/> Hospitality > Open House Refreshments <input type="checkbox"/> Hospitality > Project GO Refreshments <input type="checkbox"/> Misc Expense > PTA Supplies <input type="checkbox"/> Misc Expense > Website <input type="checkbox"/> Reading and Literacy > Balanced Literacy Support <input type="checkbox"/> Reading and Literacy > I Love to Read <input type="checkbox"/> Reading and Literacy > Library Books & Media <input type="checkbox"/> Reading and Literacy > Maud Hart – Book Club <input type="checkbox"/> Reading and Literacy > Reading Recovery <input type="checkbox"/> School Events & Materials > Back to School Theme <input type="checkbox"/> School Events & Materials > Laminating Film <input type="checkbox"/> Special Education <input type="checkbox"/> Staff Appreciation > Teacher Breakfast (end of year) <input type="checkbox"/> Staff Appreciation > Teacher Week (May) <input type="checkbox"/> Other: _____ |
|--|---|

(No check requests will be approved without the appropriate PTA Program Identification. If you are uncertain as to the correct Program Identification, please email treasurer@baileyppta.com PRIOR to submitting this form.)

◆ Please fill out the section below with the payee name(s) and dollar amount(s). If you have multiple receipts, please add them and provide **one total amount**.

Payee(s) (to whom should the check(s) be made?):	Amount:
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
Total amount of reimbursement/program debit	\$ _____

◆ Where would you like your check(s) sent?

- Please place it/them in my mailbox at school.
- Send home with my child: _____, via his or her teacher:
(teacher name) _____
- Please mail to me in the attached **self-addressed, stamped envelope**.

◆ Dated: _____ Signed: _____

Reminder: Itemized bills, sales slips, receipts, etc. **must be submitted with this form!** If you wish to retain copies of receipts, please make them before submitting this form. Receipts will not be returned after they are submitted to the Treasurer.