

Palmetto Middle School PTSA Check Request

Date submitted: _____

Payable to: _____

Address: _____

City & Zip: _____

Phone: _____

Receipt Attached: Y \ N Amount to be paid: _____

If no receipt explain: _____

Explanation/Description of purchase and / or request for check:

Budget account # _____ Budget Item: _____

Requested By: _____ Phone: _____

Date Paid _____ Check # _____

Approved _____