

Willow Springs PTA - Request for Disbursement

Please use this form when requesting reimbursement for **approved expenses** from the PTA Treasurer.

Name of person requesting funds: _____

Phone Number: _____

Date: _____

Amount requested: _____
(Not to exceed your approved budget)

Check should be made payable to: _____

Check should be sent to: _____

Funds to be used for: _____

Account/Event to be charged: _____

Authorized Approving Signatures:

Teachers & Staff – Principal’s Signature Required: _____
OR

Parents – Event Coordinator Signature Required: _____
(Sign and print name)

Signature of Requester: _____
(Sign and print name)

Receipts or invoices supporting the expenditure MUST be attached to this form

(TREASURER USE ONLY BELOW THIS LINE)

Approval Signature for Disbursement: _____

_____ minus _____ minus _____ = _____
Total Budget for Account Amount Already Spent This Disbursement Remaining Funds Available

Date Request Approved by Board, if not in budget: _____

Check Number: _____ Date Issued: _____ Account Charged: _____