

**CROCKER HIGHLANDS PTA
REQUEST FOR PAYMENT/REIMBURSEMENT**

Date: _____

Telephone: _____

Event/Activity: _____

Invoice/Receipt attached: Yes Amount: _____
 No Advance/receipt to follow

Please issue payment to: _____
Address: _____

- Please issue check to ME.
- I will pick up at school office.
- Please contact me when ready for pickup.

Payment Authorization

Fundraising/Event Chairperson: _____

Budget Category: _____

Board Approval: _____

Treasurer's Use:	Check #: _____	Date: _____
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PTA President: _____

Financial Secretary: _____

or attach Warrant