

LBMS PTA Request for Bank Check

Treasurer	Check Number _____
Use	Date Paid ____ / ____ / ____
Only:	Posted _____

Name: _____

Address: _____

Phone: _____

E-Mail: _____

Committee: _____

Mail to: (if different than requested by)

Payable to: (if different than requested by)

Description of expenses	AMOUNT:

IRS Identification No: 23-7256935	TOTAL DUE:	
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Please note: NO SALES TAX can be reimbursed. Please use Tax Exemption Certificate when making purchases. Please attach all receipts and supporting documents to ensure proper payment.

Treasurer Use Only	Committee:	Amount:
Amount within budget?	Yes No	_____
If No:		_____
Expense approved by Motion?	Yes	_____
Date Passed: _____		_____
Treasurer –		
Chia-Yu Chung chiayu97@gmail.com 1719 Settlers Reserve Way (216)526-7760		

Please bring check to next LBMS PTA meeting

Please mail check. I have included a self-addressed stamped envelope