Westlake High School PTSA
Check Request Form

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

Name: _____

Address: _____
Westlake, OH 44145

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: 23-7256980	TOTAL DUE:	

Please note: NO SALES TAX can be reimbursed. Please use Tax Exemption form when making purchases.
Please attach all receipts and supporting documents to ensure proper payment.

Treasurer Use Only		Committee:	Amount:	Balance:
Amount within budget?	Yes No			
If No: Expense approved by Motion?	Yes			
Date Passed: _____				

Treasurer –	Katie Tomici WHSPTSAtreasurer44145@gmail.com, (206) 206-227-9528

Please bring check to next WCPTA meeting. ☐

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