

# Request for Payment

2012 Gaithersburg Middle School PTA

Please make check payable to: \_\_\_\_\_

Mail check to: \_\_\_\_\_

Date Requested: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Committee/Activity Line Item to be Charged (List on Back)  
\_\_\_\_\_

Purpose: \_\_\_\_\_  
\_\_\_\_\_

Itemization of Expenses (invoices/receipts attached):

Account	Vendor	Description	Amount

Check Requested by: \_\_\_\_\_  
(Signature & Date)

Committee Chairperson's Approval:  
\_\_\_\_\_  
(Signature & Date)

Officer's Approval:  
\_\_\_\_\_  
(Signature & Date)

**\*\*Receipts MUST be attached.\*\***

\*\*\*\*\*

Paid by Check No: \_\_\_\_\_

Date: \_\_\_\_\_