LEBANON BOROUGH PTA

CHECK REQUEST FORM

Requested by: _____ Signature: _____
Print Name

Amount: _____

Payable to: _____

Budget Category: _____

Balance in Budget Category: _____

_____
Authorized by PTA President, Diana Melrose

Date of Request: _____

Check #: _____

Date of Check: _____

Amount Charged: _____

This expense voucher must be submitted to the Treasurer within 30 days of the expense and must have receipts, invoices and order forms attached.