



JY Joyner Magnet Elementary School

Check Request Form

Instructions:

1. Please print and complete every part of this form *except* for **PTA-use** section.
2. Attach receipt(s) to the form.
3. Attach a stamped, self-addressed envelope if you would like the check mailed.
Otherwise, you will be notified to pick up your check via email or phone when it is ready.
4. Leave the completed form in the door box of the JY Joyner PTA office or email electronic versions to **jeanneelizabeth22@gmail.com**

Please note that all Check Requests are subject to PTA approval. Requests without receipts may be rejected.

Check Request by: _____ Date: _____

Address: _____

Phone/Email: _____

Activity/Event	Description of Expenditure	Amount	Invoice/Receipt <input type="checkbox"/>

Total Requested \$ _____

Payable to (if different than requestor): _____

Special note to Treasurer: _____

Requestor Signature: _____

Committee Chair Approval: _____

Treasurer Contact: Elizabeth Kirby, 919-247-5946 **President:** Adrian Standish, 919-810-0580

PTA Treasurer Use Only

Date Received	Account	Check Number	Date Paid	NC Sales Tax