



Grant Payment Processing Form

Requester Fills In

Date of Request _____

Person Requesting _____

Recipient Name _____

Amount of Check \$ _____

Mailing Address/ACH Instructions _____

Purpose _____

Signature of Requester _____

Note: If item has already been purchased, please attach receipt(s) to this form. Otherwise, provide receipt(s) as soon as possible after purchase. Approval must be obtained on all purchases. Failure to obtain approval may result in purchaser having to incur the expenses. Signature of the PTA president is required before treasurer will issue check.

Approval _____ Date: _____

FOR TREASURER'S USE ONLY

Date Issued _____

Charged to what budget item _____

Check Number _____

Comments _____

Treasurer's Signature _____