

CRES PTA PAYMENT REQUEST FORM

IF YOU ARE COMPLETING THIS FORM, THEN YOU HAVE BEEN HELPING THE STUDENTS OF CAUGHLIN RANCH ELEMENTARY. THANK YOU!

PLEASE ATTACH ORIGINAL RECEIPTS TO THIS FORM

NAME: _____
REQUEST DATE*: _____

BUDGET CATEGORY**: _____

DESCRIPTION OF PURCHASE(S):

TOTAL AMOUNT REQUESTED***: \$ _____

PAYABLE TO: _____

DELIVER TO: _____

- * PLEASE SUBMIT RECEIPTS WITHIN 30 DAYS OF EVENT.
- ** PLEASE REMEMBER THAT FUNDING FOR EACH PTA BUDGET CATEGORY IS LIMITED TO THE AMOUNT APPROVED IN THIS YEAR'S ADOPTED BUDGET. IF YOUR REQUEST EXCEEDS THE AMOUNT AVAILABLE IN THE BUDGET CATEGORY, YOU WILL NOT RECEIVE THE AMOUNT YOU REQUESTED. IF YOU HAVE QUESTIONS REGARDING THE BUDGET, PLEASE CONTACT A MEMBER OF THE PTA BOARD.
- *** OUR PTA IS NON-PROFIT, SO DOES NOT PAY OR REIMBURSE SALES TAX. PLEASE SEE THE PTA PRESIDENT OR TREASURER FOR MORE INFORMATION.

PTA FUNDING IS (circle one): APPROVED NOT APPROVED

PTA PRESIDENT: _____ DATE: _____