

West Millbrook Middle School PTSA

8115 Strickland Road Raleigh, NC 27615

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Fax: 919-870-4064

<http://www.wmms.net/>

2012-2013 Check Requisition Form

Submit to Treasurer

1. **Please fill out the form completely.** Invoices/Receipts *must* accompany form to be reimbursed.
2. **If immediate payment is required** (for example, an invoice that must be paid within 14 days) or special arrangements have been made; please notify _____ at the time this form is submitted.
3. Check requests will be picked up at school every week and checks mailed or delivered to the school the following week.

Today's Date ____/____/____

Requested By: _____

Purpose of Expenditure:

Amount of Check: \$ _____

Date Check Needed By: ____/____/____

Please highlight if date is within 14 days

Make Check Payable To: _____

Send Check to: Name or Company: _____

Street: _____

City, State, Zip: _____

Treasurer's Use Only

Approved By: _____

Check # _____

Check Date _____