Centennial Lane Elementary School PTA
3825 Centennial Lane
Ellicott City, MD 21042
410-313-2800

DISBURSEMENT REQUEST FORM 2016-2017

To the Treasurer: Date: _____

Pay to the Order of : _____

Total Amount: $_____

Charge to the account of (Budget line item): _____

Purpose: _____

_____

Itemized Expenses	**Amount**
Total	

Please attach original receipts.
If invoice needs to be returned with payment, please include a copy of the invoice.

Requested by:_____
(***your signature***)

Email address:_____

Would you like your check ☐ mailed or ☐ placed in a CLES PTA mail slot?

Mailing address, if mailed _____

_____

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Paid by check #: _____ Date: _____

Issuing Officer:_____
Signature

Issuing Officer:_____
Signature

_____
Title

_____
Title