



PTSA Requisition/Expense

Date _____

Paid To _____

Amount \$ _____ Check # _____

Address _____

Disposition of check

Address _____

Mail to address shown _____

PTSA Mailbox _____

Description : _____

I certify that the goods or services indicated per the documentation or explanation provided were received, that documentation is provided and that payment is in order.

Authorized Purchaser

Mara Shapiro PTSA President

Expense account charged _____

Attach Receipts or Invoice