

PTA VOUCHER

revised 04/2014

Budget Item/Committee To Be Charged: _____ Date: _____

Committee Chair: _____

Signature: _____

Submitted By: _____
(if different than Committee Chair)

Signature: _____

Make Check Payable To: _____

Amount(s): _____

Expense
Description(s): _____

TOTAL

To Be Filled In By Treasurer

Record of check payment: Date: _____ Check # _____ Amount: _____

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