

**HUNTING RIDGE PTA  
Check Request**

*(One Check Request per Payee)*

Check Payable to: \_\_\_\_\_

Date of Request: \_\_\_\_\_

1. Committee: \_\_\_\_\_

Purpose of Expenditure: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Committee Chair Signature: \_\_\_\_\_

2. Committee: \_\_\_\_\_

Purpose of Expenditure: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Committee Chair Signature: \_\_\_\_\_

***All receipts, invoices or contract copies must be attached.***

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**FOR TREASURER'S USE**

Check No: \_\_\_\_\_

Date: \_\_\_\_\_

Amount: \$ \_\_\_\_\_