

## TREASURER REQUEST FORM

Complete form and attach all original receipts and board member signature.

Email to <a href="mailto:treasurer@kirklandptsa.org">treasurer@kirklandptsa.org</a> or deliver to KiMS office

Treasurer will contact you when your check is ready for pick up.

Process may take up to 14 days.

MEQUEST CITECITY		mbursement ssroom Grant	•		REPORT NON-CASH DONATION:			
DATE:				TOTAL AMOUNT:				
CHECK REQUESTED BY:								
EMAIL & PHONE NUMBER:								
BUDGET LINE ITEM (One per form):								
DESCRIPTION: Attach all ORIGINAL receipts and/or invoices								
INDEPENDENT CONTRACTOR FORM (Required for ALL vendors providing service):								
INDEFERENCE CONTRACTOR FORM (Required for ALL vehicles providing service).								
PAYABLE TO:								
NAME/COMPANY:								
POSTAL ADDRESS:								
EMAIL & PHONE NUMBER:								
DELIVERY (Check one):		☐ Mail Payment ☐ Hand Delivery						
CHECK APPROVED BY (Board Member Name):								
APPROVAL SIGNATURE								
FOR TREASURER'S USE ONLY:								
CHECK #:		DATE ISS		2 0 002 011211	TOTAL A	MOUNT:		
NOTES:								