

Issaquah High PTSA Check Request Form

* Please include original receipts/invoices with your request. *

Thank you for all you do in support of our students, staff, and parents of Issaquah High!

Amount Requested: \$	/ Today's Date://
Requestor Name:	Email:
Check Payable To: ☐ same as above OR:	
Address to Mail Check:	
Budget Category (if known):	
1	Amount: \$
2	Amount: \$
3	Amount: \$
Description/Purpose:	
Signature of Person Submitting:	
Please submit your form & receipt/s to: 1. The IHPTSA Mailbox at IHS OR 2. Scan and email documents to	
IHPTSATreasurer@gmail.com OR 3. Mail your documents to IHPTSA, PO Box 2541 Issaquah, WA 98027.	
Treasui	rer Use Only
Check Payable To:	
Check Number:	/ Check Date://
Check Amount: \$	
Budget Category: ☐Same as above ☐	
Approval for Expenditure: □Per Budget □Pres	/VP/Chair Approval Needed (documentation attached)