

# Hage Elementary School PTA

## Teacher Classroom Check Request

2010-2011

Date Requested: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Room Number: \_\_\_\_\_

Number of Students on 11/01/10 \_\_\_\_\_

X 8.00

Amount of Check: \$ \_\_\_\_\_ Project: Classroom Needs \_\_\_\_\_

Remarks:

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Your check will be placed in your box in the office.

President's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Secretary's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*REMINDER\*\***

Please attach all receipts to this form.

I recommend that you make a copy just in case it is lost.

Receipts must reflect dates 7/1/10 and later for supplies for your classroom.

All reimbursements requests should be completed by 5/1/11

Turn in the check request to:

Melanie Book / PTA Treasurer  
Treasurer mail slot in the office

Phone: (858) 212-9072  
email: [melanie@bookfamily.com](mailto:melanie@bookfamily.com)

[www.HagePTA.com](http://www.HagePTA.com)