

S.F.E.P.T.A. CHECK REQUEST FORM



Make Check Payable To:

Send/Return Check To:

Check Requested By:

Address: _____

Total Amount Requested:

Date Needed:

Phone:

Email:

Committee to be Charged:

<u>Amount</u>	<u>Committee</u>	<u>Description</u>	<u>Amount</u>	<u>Committee</u>	<u>Description</u>
_____	Adopt A Book	_____	_____	Holiday Mart	_____
_____	Accelerated Reader	_____	_____	Membership Dues	_____
_____	Artist In Residence	_____	_____	Office Supplies	_____
_____	Assemblies	_____	_____	Recess - Indoor	_____
_____	Book Fair	_____	_____	Reading Den	_____
_____	Cubs Corner Store	_____	_____	Reflections	_____
_____	Family Fun Night	_____	_____	School Pride	_____
_____	Family Game Night	_____	_____	Staff Appreciation	_____
_____	Family Reading Night	_____	_____	Track & Field	_____
_____	Family Science Night	_____	_____	Volunteer Celebratio	_____
_____	Fitness	_____	_____	Yearbook	_____
_____	Fundraiser	_____	_____	Other	_____
_____	Gift Cards	_____	_____		_____

Please attach receipts and return completed form to Laura Barrows in a timely manner. We would like to have the reimbursement requests within a month your receipt date.

Any questions please email Laura Barrows at laura@discoversnapology.com or Audrey St. Germain at audreydrew2002@yahoo.com

Signature _____

Thank you for your time and cooperation!

Rev 08-11

Approved By:		
Check #	Date	Amount Paid