

# -REQUEST FOR PTA FUNDS FORM-



## 2011-12 Sabin School PTA **Achieve Anything!**

Sabin School PTA  
4013 NE 18<sup>th</sup> Ave.  
Portland, OR 97212  
Ph: 503-916-6181  
Fax: 503-916-2669  
[SabinPTA@gmail.com](mailto:SabinPTA@gmail.com)  
[www.SabinPTA.com](http://www.SabinPTA.com)

Today's Date: \_\_\_\_\_ Date of Event/Expenditure: \_\_\_\_\_

Person submitting this form: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Office/Room #: \_\_\_\_\_

Committee or Budget Category: \_\_\_\_\_  
(Please be sure this is a category on the 2010-11 Sabin PTA budget. --- Ex: "Auction Expense")

**PAYMENT TYPE:** (you must check one)

\_\_\_\_\_ Direct Payment to Vendor (provide copies of bill/invoice with itemization clearly shown)

\_\_\_\_\_ Reimbursement (all receipts attached and totaled)

Check payable to: \_\_\_\_\_ Amount of check: \$ \_\_\_\_\_

How does this benefit Sabin students?: \_\_\_\_\_

**Must enter 2011-12 Sabin PTA line item number (below) OR receive PTA Treasurer and/or PTA President pre-approval (at bottom) to guarantee reimbursement. Please e-mail [SabinPTA@gmail.com](mailto:SabinPTA@gmail.com) with questions or concerns.**

Line item number from current 2010-11 Sabin PTA budget (please refer to 2011-12 Sabin PTA budget)

Pre-approved by 2011-12 Sabin PTA Board (please obtain signatures at bottom)

**METHOD OF DELIVERY:** (Check will be placed in corresponding staff mailbox unless otherwise requested):

**Authorized Sabin PTA board member use only (MUST BE SIGNED FOR PRE-APPROVAL):**

_____	_____	_____	_____
Authorized Signature	Date	Authorized Signature	Date
Check # _____	Notes: _____		