

# PSG Check Request

**Please complete the following:**

Date Submitted: \_\_\_\_\_  
Submitted by: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Board Approval:** Committee Members must receive prior approval for expenditures from a Committee Chair. The Committee Chair must operate within the committee's budget, which was obtained from the Board. This form must be signed by a Board Member (below) before it can be submitted.

Board Member: \_\_\_\_\_  
Committee: \_\_\_\_\_  
Budget Line Item: \_\_\_\_\_  
(Category, such as, Enrichment, Aides, Teacher Allotment, Health and Safety, etc.)  
Describe Request: \_\_\_\_\_

Board Signature:

**Check Information:**

Payable to: \_\_\_\_\_ Amount: \_\_\_\_\_  
Mail/Return to: \_\_\_\_\_  
Address: \_\_\_\_\_

How would you like the check delivered? Please indicate:

- leave in designated Parent Center cubby: \_\_\_\_\_
- pick up from Kenter front office
- mail to address indicated above
- arrange with treasurer via email

**Procedure:**

**CHECK REQUESTS SUBMITTED WITHOUT ORIGINAL RECEIPT(S) AND BOARD SIGNATURES WILL NOT BE PROCESSED.**

1. Complete form and attach receipt(s) and other documentation.
2. Place in "Treasurers" cubby in the parent center of the Kenter main office.
3. Requests are picked-up weekly, on Monday mornings at 8:00 am.
4. Reimbursement will be delivered within 1-2 weeks.

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PSG Use Only: Date Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ Amount: \$ \_\_\_\_\_