Check #	

## **Los Altos High School PTSA**

## **Request for Payment Form**

For any questions, and for fastest processing, submit			
<u> </u>	LAHSPTSATreasurer@gmail.com		
Or you may submit to:			
Date	Amount Requested \$		
Expense Description			
Make Check Payable to			
Requested by			
Contact Information (email	or phone number)		
Mailing Address for check of	delivery		
NOTE: I	PLEASE ATTACH ALL R	ECEIPTS	
Approved by		Committee Chair, if applicable	
Approved by		President	
Approved by		Secretary	
For PTSA Treasurer's u	ise only:		
Date	_ Check Amount	<b>\$</b>	
Expense Categories		\$	
		\$	
		\$	