

Pentucket Athletic Association



Check Request Form

NOTE: This form should be completed when requesting reimbursement, invoice payment, petty cash advance, etc. **Please submit supporting documentation with a check request form.** Check requests submitted by end-of-day Tuesday each week will be ready for pickup or mailing the following Monday.

Today's Date: _____

Person requesting check: _____

Booster group: _____

Type of Request (please check):

_____ Reimbursement from Booster Group Fund _____ Reimbursement from PAA General Fund

_____ Loan from PAA General Fund * _____ Gift from PAA General Fund *

_____ Gift from the Athletic Director's General Fund *

** If a 'Gift' or 'Loan', please include the date of PAA approval:* _____

Purpose/Description/Reason for Check Request:

Approval Date: _____ Amount of Check: \$ _____

Date needed: _____ (Please note process timing above)

Check payable to: _____

Check to be sent to (address):

Name/Business: _____

Street: _____ City: _____ State: ____ Zip: _____

* Two (2) signatures are **required** (a parent and a coach, or 2 parents from different families)

Signature 1: _____

Printed Name: _____

Signature 2: _____

Printed Name: _____

Please submit a completed check request form with supporting documentation at a PAA meeting or email to pentucketathleticassn@gmail.com.

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