## **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 chec	ek):			
Reimbursement from B	ooster Group Fund	Reimbursen	nent from PAA Gener	al Fund
Loan from PAA General Fund * Gift from PAA General Fund *				
Gift from the Athletic Di	rector's General Fund	1 *		
* If a 'Gift' or 'Loan', ple	ase include the dat	e of PAA approval:		
Purpose/Description/Reason	n for Check Reques	t:		
Approval Date:	Amou	ınt of Check: \$		
Date needed:	(Please note p	process timing above)		
Check payable to:				
Check to be sent to (a				
Name/Business:				
Street:	City:	State:	Zip:	
* Two (2) signatures are <u>req</u>	uired (a parent and	a coach, or 2 paren	ts from different fa	milies)
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 <a href="mailto:pentucketathleticassn@gmail.com">pentucketathleticassn@gmail.com</a>.