DULANEY HIGH SCHOOL PTSA
DISBURSEMENT FORM

In order to get your request paid, you **must** have an original receipt attached to this form. If you have any questions, please contact Aimee Anton 410.785.4070 or ravensanton@verizon.net

Date: _____________ Name: _______________________________

Telephone or e-mail: __________________

Amount: $ _______________

Pay to the Order of: ____________________________________________

Description of Purchase: ________________________________________

Charge to PTSA Budget Line: ____________________________________

Send Check to: ________________________________________________

Address: _____________________________________________________

_____________________________________________________

Approved by: ____________________________________________

PTSA Title: ____________________________________________

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TO BE COMPLETED BY TREASURER:

Sub Total: ______________ RST: ___________ Total: ______________

Paid by Check # ________________________ Date: ________________

Issuing Officer: ____________________________________________

Title: _____________________________________________________