

Cash Advance Request - Tesago PTA

Name of Person Requesting Advance: _____

Telephone #: _____

Make Check Payable to: _____

Amount of Check: _____

Signature of Person receiving check: _____

PTA Account to be charged: _____

For Treasurer's Use Only

Check Number: _____

Amount of Check: _____

Treasurer's Initials: _____

Date Paid: _____