

# Alberta Smith Elementary School PTA

## Cash Advance

Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name: \_\_\_\_\_ PTA Committee: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Budget Category (e.g. Holiday House): \_\_\_\_\_

Event or Activity (if applicable): \_\_\_\_\_ Event Date: \_\_\_\_\_

Estimated Expenses:

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL REQUESTED:** \$ \_\_\_\_\_

Check Payable to: \_\_\_\_\_

Delivery:

Send home with: \_\_\_\_\_

Pick Up (make arrangements with treasurer)

Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Please Sign: I request the amount above for Alberta Smith Elementary School PTA business. Within two weeks of the completed event, I agree to submit an expense statement along with the required receipts and to refund any unused portion of the advance to the PTA.

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(date)

**FOR TREASURER USE ONLY**

Approved by: \_\_\_\_\_

Date Received: \_\_\_\_\_

Date Paid: \_\_\_\_

\_\_\_\_\_ Amount: \_\_\_\_\_

\_\_\_\_\_ Check Number or Confirmation: \_\_\_\_\_