



**Pointers Run Elementary School PTA  
Disbursement Request  
2024/2025 School Year**

**Amount Requested:** \$ \_\_\_\_\_ **Date Requested:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Please attach invoice to be paid or original receipts to be reimbursed)

**Pay to the Order of:** \_\_\_\_\_

**Address (to mail if needed):**  
\_\_\_\_\_

**Charge to the Account of:**  
**PTA Committee:** \_\_\_\_\_

**Preferred Disbursement Receipt Method:** Check \_\_\_\_ Zelle \_\_\_\_;  
If Zelle, phone # or email to receive funds: \_\_\_\_\_

**Purpose:** \_\_\_\_\_

**Itemized Expenses:**

Description	Amount

**TOTAL \$** \_\_\_\_\_

**Requested by:** (*print name*) \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

\*\*\*\*\*

**PTA Use Only:**

**Paid by Check Number:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **By:** \_\_\_\_\_

**Issuing Officer's Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_