



ISSAQUAH HIGH PTSA CHECK REQUEST FORM

Please include original receipt/invoice with this form.

The IHPTSA is grateful for everything you do to support the students, staff, and parents of Issaquah High!

Amount Requested: \$ _____ Date: _____

Name: _____ Email: _____

Check Payable To: _____

Street Address: _____

City, State, ZIP: _____

Budget Category (if known): _____

Purpose: _____

Signature of Person Submitting: _____

Please give form & receipt to current treasurer, Patti Miller, either by placing in PTSA mailbox at IHS or mailing to IHPTSA, PO Box 2541, Issaquah, WA 98027. Contact Patti at IHPTSATreasurer@gmail.com or 425-260-8995 if assistance needed

For Treasurer's Use Only	
Check Payable To:	_____
Check Number:	_____ Check Date: _____
Check Amount:	_____
Budget Category:	_____