



# BONITA CANYON PTA

1 Sundance Dr, Irvine, California 92603 Phone: (949) 936-5450

## REQUEST FOR CASH ADVANCE FORM

Date Paid

Check No.

The following funds are being requested for the benefit and/or use of Bonita Canyon PTA.

Event: \_\_\_\_\_

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

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

**Funds Being Requested for:** \_\_\_\_\_

**List Estimated Costs:** \_\_\_\_\_ \$ \_\_\_\_\_

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

**Total Advance Requested** \$ \_\_\_\_\_

**Make Advance Check Payable To:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Budget Department/Category: \_\_\_\_\_

I request the above advance for expenses of authorized Bonita Canyon PTA business. Within two weeks of the completed assignment, I agree to submit an expense statement along with the required receipts and to refund any unused portion of the advance or to claim money due to me, providing the total is not in excess of the approved amount.

Chair/Board Member Signature: \_\_\_\_\_

### ***PTA Approval***

Secretary's Approval: \_\_\_\_\_

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

President's Approval: \_\_\_\_\_

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