



# Belmont PTA Cash Box Request

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

Date of event: \_\_\_\_\_

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

Number of cash boxes needed: \_\_\_\_\_

Total amount requested for cash boxes: \$ \_\_\_\_\_

Make check payable to: \_\_\_\_\_

Requested by: \_\_\_\_\_

**Person requesting check will be responsible for all cash. This person must also verify amount in cash boxes with a PTA board member at the start of the event.**

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### For Board Use

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

Title:            Treasurer

\_\_\_\_\_

President

\_\_\_\_\_

Vice-President

Budget: \_\_\_\_\_

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

Check #: \_\_\_\_\_

Cleared: \_\_\_\_\_