

# Linden Home and School Association

## *Treasurer Request Form*

### *Check Request – Reimbursement - Start Up Cash/Bank*

(Please circle one of the above)

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

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

**Telephone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Committee/Activity:** \_\_\_\_\_

**Use of Funds:** \_\_\_\_\_

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

**Amount Requested:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

Attach all receipts, invoices, contracts, purchase orders etc. and return to Rebecca DeHaven, Treasurer, via the mailbox in the Linden office or email (for cash start up requests). Questions? Email/Call [dehaven\\_r@yahoo.com](mailto:dehaven_r@yahoo.com) or 215-534-1263

*Do not fill out below – Treasurer's Use Only*

**Date Paid:** \_\_\_\_\_

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

# Linden Home and School Association

## *Cash/Check Deposit Form*

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

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

**Telephone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Committee/Activity:** \_\_\_\_\_

**Ttl \$ of Checks:** \_\_\_\_\_

**Ttl \$ of Cash:** \_\_\_\_\_

**Grand Total:** \_\_\_\_\_

**Your Signature:** \_\_\_\_\_  
**Chairperson's**  
**Signature (if**  
**different)** \_\_\_\_\_

For payments from various people, please attached (or email) record-keeping spreadsheet with the following information: Name, Amount Paid, Form of Payment, and Check Number (if applicable).

For questions or to coordinate cash pick-up please email or call Rebecca DeHaven, Treasurer, at [dehaven\\_r@yahoo.com](mailto:dehaven_r@yahoo.com) or 215-534-1263