

## **DEBIT CARD PURCHASE REQUEST FORM:**

Requestor's Informati	on:	
Request Date:	Phone Numbe	r:
Name:	Email Address	:
Event:		
Reason for request:		
Payment Due Date/	Date Needed:	
Payable To:		
Purchase Amount:		
Chairperson or PTA Exec	utive Board Member Approval:	
Name:	Signature:	
-	sts must include original or cop ber Signature in order to be pro	y of all receipts or invoices and a Chairperson or PTA cessed for approval.
Please send your completed form and all necessary documentation to OCIS/OCPS Main Office Attention: PTA Treasurer, Sandra (Heng) Han or in an agreed upon alternate location.		
	urchase Request Forms will be p (Heng) Han, PTA Treasurer, at h	rocessed within two weeks. If you have any questions, ansandrak@gmail.com.
Approval Date:	Purchase Date:	Purchase Amount:
Treasurer Signature:		_ Co-Signer: