

**HALF HOLLOW HILLS
HIGH SCHOOL WEST PTSA
Payment Voucher**

INDIVIDUAL REQUESTING PAYMENT : _____

DATE OF REQUEST: _____

AMOUNT: _____ Check # _____

MAKE CHECK PAYABLE TO: _____

COMMENTS: _____

Appropriate Documentation MUST accompany this form - (receipts/order form etc.)

- | | |
|--------------------------|-------------------------------------|
| Bank Fees | Legislative Committee |
| Back to School Night | Meet the Candidates |
| Circus | Membership Dues to NYS |
| Council Dues | Mothers Day |
| Council Scholarship Fund | Parent Orientation |
| 1/2 Photo Day | Pep Rally/Homecoming |
| Founders Day | Senior Lunch |
| Graduation | Senior Scholarships |
| Health & Wellness | Staff Appreciation/Outgoing Parents |
| Holiday Gifts | Supplies/Paper/Postage |
| Hospitality | Teachers Recognition Luncheon |
| Insurance | Training Programs |
| Jenkins Memorial Fund | Unity Fair |
| Journal - Yearbook Ads | Valentines Day |