

***Believe in the Child***



**Montessori Academy  
School #53 PTA**

## **REQUEST FOR REPLACEMENT OF LOST CHECK**

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

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

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

CHECK #: \_\_\_\_\_ ISSUED TO ME ON (date) \_\_\_\_\_ FOR \$ \_\_\_\_\_

HAS BEEN LOST OR IS MISSING. PLEASE ISSUE ME A REPLACEMENT CHECK.

- Should the original check be found, I agree to return it to the Montessori Academy PTA Treasurer.
- Should the original check clear the bank, having been cashed through an oversight by myself, I agree to reimburse the Montessori Academy PTA for that dollar amount.

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

NOTES(IF ANY):