



Lake Tapps Elementary School PTA
Proudly serving Lake Tapps and Dieringer Heights Elementary Schools

Statement of Services

Date: _____

Event: _____

Service Provided: _____

Make Check Payable to: _____

Mailing Address: _____

Phone Number: _____

Signature of Service Provider: _____

Receipt(s) Attached

Invoice(s) Attached

Committee: _____

Committee Chair Signature: _____