

## Twin Ridge Elementary PTA-- Copying Approval

Materials to be copied: \_\_\_\_\_

Number of Copies: \_\_\_\_\_ (each student or youngest & only or for particular grade)

Committee/Committee Chairperson/Representative: \_\_\_\_\_

Date Requested: \_\_\_\_\_ Date Needed: \_\_\_\_\_

PTA President Approval: \_\_\_\_\_ Principal Approval: \_\_\_\_\_