

REQUEST FOR CHECK

Date of Request: _____

Person Making Request: _____

Are you a Teacher/staff? _____ VP/Committee Chair? _____ Other _____

Check should be made payable to: _____

Amount of Check: \$ _____

Address of where to send check if to be mailed:

Reason for Check:

_____ Reimbursement (receipt MUST be attached)

_____ Payment for (invoice MUST be attached)

Do you wish Treasurer to mail check? _____ or Return to Requestor _____

Is this in Budget? Yes _____ No _____

If "NO", Date of Minutes for approved spending.

What is the Budget Item? or Event, if you don't know Budget Item?

Disbursement (to be filled out by Treasurer)

Check No. _____ Amount \$ _____ Dated _____

Payable to _____

Budget Line Item Debited _____

President Review _____