

SHASTA HIGH SCHOOL CHOIR BOOSTERS
CHECK REQUEST FORM

Request made by: _____

Date: _____

Expense is for: General Choir Madrigal Dinner Musical

Check payable to: _____

Mailing address: _____

Amount requested: _____

Date needed: _____

Requested amount is: Vendor payment Advance against budget* Other

* If you are requesting an advance, please be sure to fill out a reimbursement form and attach your receipts after you have made your purchases. Forward all receipts and forms to the treasurer.

Signature of person requesting check: _____

Authorized Signature: _____

Treasurer:

Date Completed: _____

Check #: _____