



# NGSF GRANT ALLOCATION CHECK REQUEST FORM

320 Town Center Avenue  
Suite C-11 - Box #149  
Suwanee, Georgia 30024  
(770) 789-6048

[www.NorthGwinnettSchoolsFoundation.org](http://www.NorthGwinnettSchoolsFoundation.org)

- Grant-specific transactions must be procured through the county by an authorized school Bookkeeper.
- Retain **all** invoice/receipt(s) related to a specific grant **prior** to requesting NGSF reimbursement.
- Attach all related invoice/receipt(s) and completed Check Request Form.
- Mail completed forms **and** all invoices/receipt(s) to the NGSF address listed in upper-right corner.  
**ATTN: Grant Award Reimbursement/Treasurer**
- NGSF will only issue reimbursement payable to the requesting school. (*not an individual*)

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

Bookkeeper Requesting  
Check:

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Make Check Payable to:

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

Amount of Check: \_\_\_\_\_

Reimbursement for:

Grant Name/  
Teacher(s)/Amount: \_\_\_\_\_

Grant Name/  
Teacher(s)/Amount: \_\_\_\_\_

Grant Name/  
Teacher(s)/Amount: \_\_\_\_\_

Grant Name/  
Teacher(s)/Amount: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

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## For NGSF Treasurer's Use Only

Date Check Issued: \_\_\_\_\_ Check #: \_\_\_\_\_

Amount of Check: \_\_\_\_\_

Account: Grants

Comments: \_\_\_\_\_  
\_\_\_\_\_

Treasurer's Signature: \_\_\_\_\_