Thomas Jefferson Raider Parent Movement

Check Request

(Directions: Fill out the form, attach receipts and give to treasurer)

Date:		
Requestor:		_
Phone or E-Mail: _		_
Team/Group/Club_		<u> </u>
Return to Requestor:	: Yes No	
Make Check payable	e to:	
Address:		
Check Amount:		
_	Program Expense Fund Raising Expense Quid pro Quo (funds specially coll	ected for a program or an item)
Reason for Check: _		
Approved By (Team	n/Group/Club Advisor)	
Advisor Signature:		
	ATTACH ORIGINAL RE	CCEIPTS
******	**********	***********
Raider Parent Move	ment Treasurer's Use Only	
Check #	Check Amount \$	
Data Paid:		