

Desert Mountain Band Boosters, Inc
 Desert Mountain High School
 12575 E Via Linda
 Scottsdale AZ 85259

CHECK REQUISITION

Please attach related invoices/receipts to this form

DATE: _____

Requested by: _____ Phone: _____
 _____ Email: _____

Make Check Payable To: _____
 Name: _____
 Address: _____
 City/State/Zip: _____
 Amount: \$ _____

PURPOSE OR EXPLANATION (PLEASE BREAK OUT AMOUNTS IF FOR MULTIPLE ITEMS)

SPECIAL INSTRUCTIONS

SIGNATURES

Requestor: _____ Date: _____
 Treasurer: _____ Date: _____
 Board Member: _____ Date: _____

FOR TREASURY USE ONLY

CHECK #	DATE PAID	ACCT/ AMOUNT	ACCT / AMOUNT	ACCT / AMOUNT