

Athletic Booster Club



CHECK REQUEST

This form **MUST** be submitted to the Treasurer when Requesting Funds.

Both the Sports Coordinator and Head Coach signatures are required for payment to be issued.

Supporting documentation for this expenditure must be attached including invoices when submitting this form to the THS ABC Treasurer.

REQUEST

Date of Request:

Sports Account:

Requested Amount:

Requestor's Name:

Requestor's Phone:

Requestor's E-Mail:

Purpose of Expenditure:

PAYEE

Payee's Name:

Invoice/PO #:

Attach Actual Invoice or PO

Mailing Address:

Include "Attention TO" if Necessary

Other Comments:
If Needed

APPROVAL

Approved by: _____

Sports Coordinator

Date: _____

Approved by: _____

Head Coach

Date: _____

FOR TREASURER'S PURPOSES ONLY

Check Number: _____ Issued: _____ Issued from Account: _____

Received by: _____ Date: _____ Reviewed by: _____ Date: _____