SOUTH AMBOY SCHOOL DISTRICT

GENERAL ORGANIZATION AND ATHLETIC FUND CHECK REQUEST

To be completed by Requestor:

Date Submitted: _____ Payee Fund: ___General Organization ___Athletic

Activity (Account) Charged: _____

Reason for Check(s): _____

Comments: _____

Check Date	Pay to the Order of	Check #	Check Amount

*Verification: I declare the goods or services itemized have been delivered or rendered and no bonus has been given or received by any person or persons in connection with the same; the same is correct, just and true and the amount(s) stated is justly due and owing as set forth. *INVOICE TO BE ATTACHED.*

*To be completed by Requestor

_____

Signature of Person requesting check

Note: Any scholarship checks must have prior building principal approval.

FORWARD TO BUILDING PRINCIPAL or ATHLETIC DIRECTOR

Before a check can be written, the building principal or athletic director must sign below for approval of the above request(s).

I _____ approve of the above check request(s) on _____.

Signature of Building Principal or Athletic Director

Comments:_____

FORWARD TO GARY KUHN

Approval of Business Administrator _____ Date _____

Comments: _____

7/11