

Treasurer to Complete:

Check # _____

Date _____

Amount _____

1 To whom is the check to be written:

Name _____

Address _____

2 Purpose (what is/was the money spent for?)

3 Date the check is needed _____

Amount of check: \$ _____

Date this form was submitted _____

4 Contact details of the person submitting this form:

Name _____

Phone _____

Signature _____

5 Approved by _____

6 Attach receipts to the back of this form.

7 Please indicate the budget which is to be charged:

Fundraising

- Butter Braids
- Holiday Wrap/Gifts
- Jogathon
- Other Fundraising

Donations

- Box Tops
- Online Box Tops
- Inkjet Cartridges
- Pictures
- Scrip / Escrip
- Pictures
- Other Donations

Curriculum Enrichment

- After School Programs
- Art
- Club _____
- Enrichment Classes
- General Curriculum Support
- Literature
- Math
- Music
- Performance/Theatre
- Science Fair
- Teacher \$\$
- Restricted – Math _____
- Other CE _____

Services

- Bookfair
- Carnival
- Carnival Baskets
- Comfort Kits
- Directory
- Family Fun Night
- Family Support
- Newsletter
- Playground Equip
- Scholarships/Award
- School Support
- T-Shirts

