

Attach Receipts here



Check Request Form Briarlake Elementary School

For Treasurer's Use:

Date Paid:	
Check#	
Amount:	
Budget	
Pres. Approval	

Date: _____

Event: _____

Name: _____
(Name of person requesting reimbursement)

Date	Budget Category	Comments	Amount
Total			

Check Instructions:

Make check payable to: _____

_____ Send to Payee _____

_____ Send to School _____

_____ Other: _____

_____ Return to me _____