

Mayde Creek High School Ram Band Boosters, Inc.

Request for Funds

Requested by _____

Date of Request _____

Payable to _____

Date Needed _____

Address _____

Needs Tax Certificate? Yes

Approved By: _____

No

To expedite your request, please itemize each request below and attach original receipts or supporting statements to this form. Payment requests are reviewed and approved prior to issuing a check. Receipts must be submitted within 30 days. Forms can be placed in the safe or given to the Lead Treasurer. All purchases require two (2) authorized signatures. Thank you for assisting us in your prompt payment.

Description	Account (treasurer use)	Amount
Total Requested		

Additional Information _____



FOR TREASURER USE ONLY

Date Paid _____

Check # _____