



Moorpark High School Instrumental Music Boosters

CHECK REQUEST FORM

To: BOOSTER ASSOCIATION TREASURER

Date: _____

From: _____ Title: _____

• The following individual / company requires payment in the amount of:
_____ Dollars \$ _____

• Their complete name and address for payment is:

• The purpose of this payment is for:

(please attach receipt or invoice to this request form. All checks to be mailed unless noted.)

• Additional information:

APPROVALS: _____
Booster President Date Booster Secretary Date

XX
(Treasurer use only)

Check # _____ was Mailed / Given / Delivered (circle one) to:
_____ on _____ by _____

Budgeted item? _____

Additional notes _____

