

FRANKLIN HIGH SCHOOL PARENT ASSOCIATION

CHECK REQUEST

DATE

**COMMITTEE OR EXPENSE
LINE ITEM**

PAYABLE TO

PAYEE'S ADDRESS
(if needed)

CHECK DISBURSEMENT
(check appropriate box)

Check to be mailed

Check to be delivered at next Board Meeting

Other, please specify

REASON FOR PAYMENT
(attach receipt(s))

AMOUNT OF CHECK

REQUESTED BY

**EXECUTIVE BOARD MEMBER
APPROVAL (other than Treas)**
(signature and date)

CHECK NUMBER AND DATE
(for Treasurer's use only)
