

**COLONIAL FORGE HIGH SCHOOL  
BANDS**

*"THE FORGE SOUND AND GUARD"*

**CHECK REQUEST FORM**

**PLEASE PRINT NEATLY OR COMPLETE ELECTRONICALLY**

Requested By:		Date: (MM/DD/YYYY)	
Check Made Payable To:			
Items/Services:			
Date	Description	Amount	
Total Amount of Check:			
Special Instructions			
Band Director Approval		Date	
Treasurer Approval		Date	

**(Treasurer's Use Only)**

Paid:\$ \_\_\_\_\_ Date: \_\_\_\_\_ Check #: \_\_\_\_\_ Initials: \_\_\_\_\_

Please attach a copy of your receipt or original invoice if requesting reimbursement or direct payment.