

Leigh High Home and School Club

Check Request Form

Instructions:

1. Only original receipts (dated between July 1 – June 30) will be accepted and should be attached to the check request from.
2. If you require payment to a vendor, please attach an original invoice. If the vendor provides a service and the invoice amount is greater than \$600, a W-9 must also be submitted before payment is made.
3. Check requests will be processed within 10 days of receipt of request.
4. If your request is urgent, please contact the LHS HSC Treasurers at treasurer@leighhsc.org.

Check Requested by/Signature: _____		Date of Request: _____	
Requestor Email/Phone: _____			
Choose one:		Name and address of payee:	
_____ Personal Reimbursement		_____	
_____ Direct Payment to Vendor		_____	
Choose one:		_____	
_____ Mail check to vendor		Description of Item to be reimbursed:	
_____ Return check to requestor		_____	
Committee Treasurer Approval: _____		Date of Request: _____	
Treasurer Approval: _____		Date of Request: _____	

Expense to be Reimbursed	Amount	Expense to be Reimbursed	Amount
Advertising		Grants - Staff	
ASB Grant-A-Wish		Insurance	
Board Discretionary		License & Fees	
Campus Beautification		Parent Education	
Capitol Improvements		Positive School Climate	
Classroom Consumables		Presidential Discretion	
College & Career Center		SAT/ACT Scholarships	
Communication		Staff Appreciation	
Grants - Administrative		Tax Preparation	
Grants – Club Support		Website	