

**GENERAL FUND
Check Request Form**

Date _____

Payable To _____

Address _____

City/State _____ Zip Code _____

Purpose _____

Amount of Check: \$ _____ Account Code: _____

Date Check is Required: _____ ***

Checks are processed once a week on Friday.

Requests must be submitted to the Business Office by Tuesday at 2 pm to receive a check Friday pm.

*****If check has a deadline and is being mailed, allow one week for postal delivery.**

Attachments to be mailed with check: YES / NO (circle one)

Check Distribution Method:

_____ Inter-office mail to: _____

_____ Post Office Mail to: _____

Address: _____

Person Requesting Check: _____ Date: _____

Administrator Authorization: _____ Date: _____