

CHECK REQUEST WHITE CLOUD PUBLIC SCHOOLS

Date: _____

School/Program: _____

Payable To: _____

Address: _____

City: _____ State: _____ Zip: _____

Check Amount: \$ _____

Requested by: _____

Purpose/Function: _____

Account to Charge: _____

Grant Name (if grant funded): _____

(Please check all that apply and supply necessary information)

Check to be mailed to: _____

Check to be picked up by: _____

Notify _____ at (231) _____ when check is ready.

Notify via email _____@whitecloud.net when check is ready.

Supervisor/Principal

Approved By

Notes

1. The use of purchase orders (rather than checks requests) is preferred for most district purchases. Examples include teaching and testing supplies, and many other purchases. Check requests, on the other hand, are appropriate for vendors that will not accept a purchase order, e.g., field trip admission fees, and for goods or services that have been already made and for which payment has not yet been made.
2. Please submit check requests ***at least two weeks*** before the date the check is needed.
3. All check requests must be signed by a principal, supervisor, or other budget administrator. Check requests submitted without the appropriate signature will be returned to the person who submitted the check request. This may delay payment issuance.
4. Supporting documentation, e.g., receipt or order form, should be attached to the check request.