

SCHOOL DISTRICT OF



F O R T • A T K I N S O N

**2012 – 2013**  
**BUSINESS OFFICE**  
**CHECK REQUEST FORM**

This form is used to request a check. Vendor invoices or documentation associated with the check request **must** be attached to this form. Please call the business office at 920.563.7800 if you have any questions.

**REQUESTED BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(Staff Member)

\_\_\_\_\_  
(Building / Site) (Grade, Department, Program)

**PAYABLE TO:** \_\_\_\_\_ **CHECK SHOULD BE:**  Mailed to "Payable To"  
(Name of Company)  Picked up on: \_\_\_\_\_  
\_\_\_\_\_  
(Address)  Returned to Requester Above  
\_\_\_\_\_  
(City, State, Zip)  Mailed to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**RATIONALE / DESCRIPTION**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ACCOUNT CODES:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ = \_\_\_\_\_  
(Fund) (Location) (Object) (Function) (Project) (Amount)  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ = \_\_\_\_\_  
(Fund) (Location) (Object) (Function) (Project) (Amount)

**TOTAL CHECK AMOUNT:** \_\_\_\_\_

**REQUESTER'S APPROVAL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SUPERVISOR'S APPROVAL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**BUSINESS MANAGER'S APPROVAL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

(Revised July 2012)