



APT Check Request Form

Payment Requested By

_____ Cherokee _____ Visiting Author _____ DPM Graduation Dance
_____ DPM _____ Fine Arts _____ Parent Awareness
_____ Everett _____ Special Events _____ Administrative
_____ Sheridan _____ Community Service _____ Other _____

Request Made by

Name _____ Date _____
Phone Number _____

Event Pertaining to Check Request _____

Itemization	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total	\$ _____

Please attach receipts and/or contract copies. Remember, sales tax is not reimbursable.

Make Check Payable to _____

Send Check to _____

Approved by _____

Approval must be made by Building President and Treasurer if \$150 or more. Approval may be made by Building Treasurer is less than \$150. Approval may be made by Exec Board Committee Chair or Graduation Dance Committee Chair, as appropriate.



Date Paid _____

Check # _____

Account Distribution _____