

JFAST CHECK REQUEST FORM

Please complete the following in full and submit to treasurer, Tammy Yates.

Date _____ **Your Name** _____

School _____ **Email** _____

Check to be paid to _____

if different than above

Items purchased at _____

Amount \$ _____ **Event Name** _____

Description of purchase _____

Requestor's Signature _____

For a purchase: please turn signed receipt in as soon as possible.

For reimbursement: signed receipt must be turned in before reimbursement is made.

Please allow at least two working days to process.

TREASURER'S USE ONLY

Approved by:

President _____

Secretary _____

Treasurer _____

Date paid

Check #

Check Amount