



LANIER BAND BOOSTER ASSOCIATION

CHECK REQUEST FORM

Date of Request: _____

Name of Person Requesting Check: _____

Make Check Payable to: _____

Amount of Check: _____

Budget Line Item: _____

Purpose/Description: _____

Signature of Board Member: _____

Note: Please provide **all** receipts with check request.
MUST have line item and board member signature for processing.

Check # _____

Issue Date _____