

Burleigh Manor Music Parents – Check Request Form

Date: _____

Requested Payment: Urgent _____ <30 days _____ <60 days _____

Check Payable to: _____

Mail Check to:

Check Amount: \$ _____ *Receipt Attached?* Yes _____ No _____

If "No", reason? _____

Budget Account to charge:

- | | |
|----------------------------|------------------------------|
| _____ Stationary/Printing | _____ Royalties/Copyrights |
| _____ Telephone | _____ Postage |
| _____ Trophies | _____ Celebration/Grief |
| _____ Gift Certificates | _____ Music Program Supplies |
| _____ CD Cutting/Recording | _____ Band Request |
| _____ Chorus Request | _____ Orchestra Request |

_____ Other (please indicate) _____

Comments/Explanation: _____

Submitted by: _____

Treasurer Signature/Comments: _____
