

**Council Rock Band Parent Association  
CHECK REQUEST**

Amount of check \$ \_\_\_\_\_

Check should be made out to:

\_\_\_\_\_

Check requested by (name and title):

\_\_\_\_\_

Purpose of expenditure:

\_\_\_\_\_

Receipt or invoice attached? (check one)     yes     no

Payment should come from (check one):

           CRBPA general fund

           CRBPA trip account

Mail check directly to recipient? Please give address below.

\_\_\_\_\_

\_\_\_\_\_

+++++  
To be completed by Treasurer:

Check approved by Executive Board on (date) \_\_\_\_\_

Check written on (date) \_\_\_\_\_

Check # \_\_\_\_\_