Lake Highlands Area Band Club

Check Request

***Reminder*: Sales Tax Will Not Be Reimbursed**
Sales Tax Exemption Forms Are Available From the Treasurer

Request Date:_____ **Request Amount:**_____ **Account:**_____

School: **LHHS** **LHFC** **LHJH** **FMJH**

Payee: _____

Address: _____

_____

For: _____

_____

_____

Please Attach Receipt(s)!

Requested by:_____ ____**Mail to Payee**
____**Deliver to LHHS Band Hall**
Approval by chairperson:_____ ____**Other (specify)**

Approval by club president:_____ **Need by:**_____

Treasurer:_____ **Date Paid:**_____ **Check Number:**_____

Deposit

Date:_____ **Amount:**_____ **Account:**_____

Proceeds from:_____ **Deposit by:**_____

White – Treasurer **Yellow – President** **Pink-Chairperson/Band Director**