



# Benavides Independent School District

106 West School Street  
Benavides, Texas 78341  
Ph 361-256-3003

P.O. Box Drawer P  
Fax 361-256-3002

## Check Request Form

This form is to be submitted to the bookkeeper by the appropriate sponsor with the invoice and/or receipt. Every blank must be complete and purpose of expenditure clearly stated so that the campus administrator can consider approval of the request. Unapproved request will be returned to sponsor. This request will not be approved if there are sufficient funds in your club account to cover the amount of the request. Please allow a minimum of 24 hour turnaround time for check to be picked up.

Campus: \_\_\_\_\_ Date: \_\_\_\_\_

Pay To: \_\_\_\_\_ Amount: \_\_\_\_\_

Is Payee a District Employee: Y / N

Purpose of Expenditure : \_\_\_\_\_

By Signing this statement, I Authorize the District to payroll deduct any unsubstantiated amounts. Unsubstantiated amounts include, but are not limited to, those for which a receipt has not been provided. Receipts must be provided within 2 working days from the date a check is issued.

Approved: Y / N

\_\_\_\_\_  
Principal/Admin Signature                      Date

**For Business Office Use Only**

\_\_\_\_\_  
Sponsor Printed Name

Check Info: \_\_\_\_\_

\_\_\_\_\_  
Club Sponsor Signature

\_\_\_\_\_  
Business Office Printed Name and Signature