

# West Salem Band Boosters Check Request Form

Office use:
Check _____
Date _____
Mailed _____

Payable to \_\_\_\_\_ Check Amount \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Special handling instructions: \_\_\_\_\_

Circle Budget Category:      Marching Ensemble      Winter Guard      Youth Winter Guard      Winter Percussion  
Youth Percussion      Concert Bands      Jazz Ensembles      Office/Admin      Trip      Other \_\_\_\_\_

Budget line item to be charged: \_\_\_\_\_  
(List separately below if more than one line item will be charged)

Reason for request or description of items purchased:

Approved by Director of Bands (Zimbelman):

\_\_\_\_\_

Requested by:

Approved by Band Booster President (Farnell):

Name \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

- Notes: 1) An invoice, purchase order, or receipt must be attached.  
2) Check request must be signed by Mr. Zimbelman and Mr. Farnell  
3) Address must be included for any new payees. If in doubt, please include it.