OHS Athletic Booster Club Assisting Pirate Sports

PO Box 1456
Oceanside, CA 92051

Attachment C

CHECK REQUEST FORM

Check Request requirements: 1) Head Coach signature. 2) All supporting receipts, invoices or email back up. 3) List the purpose of expenditure. It is recommended that a Parent Rep or Assist. Coach sign check requests as well

*Check Request can include multilpe requests. Please make an effort to prepare requests based on specific events…ex: Spirit Gear, Snack Bar Bank, etc…

TEAM: _____ **Attachment C**

DATE: _____

TEAM/PARENT REP: **HEAD COACH APPROVAL:**

Payable To	Amount	Purpose	Rec/Inv Attached	OHS ABC Check No.

DATE CHECKS PREPARED / DATE CHECKS DELIVERED TO COACH OR PARENT REP	OHS ABC TREASURER SIGNATURE

OHS ABC: Oceanside High School Athletic Booster Club

	501 (c)(3)	46-3657525								Attachment C