

SPMS Music Boosters Check Request Form

Write Check to: _____ Date: _____

Payee: _____

Address: _____
Street City State Zip

Contact Information: _____
Phone Number E-mail

Budget Category/Event: _____

ie: Instrument/Equip Repairs, Music Equip Purchases, Sheet Music & Supplies, Travel & Performance Exp, Other

Requested by: _____ Position: _____

Please list expenses below:

Receipt Date	Name of Store/Vendor	Description of Purchases	Amount	Program <small>(MS Band, Orch, Choir, 5th Grade Band, ALL)</small>
Total requested			\$	

Please attach ORIGINAL supporting receipts / invoices to the back of this form.

-- For Treasurer's Use --

Approval:

President's Signature Date Secretary's Signature Date

Amount of check: \$ _____

Check #: _____

Invoice Attached

Receipt Attached

Please make a copy for your records before submitting to:

South Pasadena Middle School Music Boosters Treasurer
 spmsmb.treasurer@gmail.com
 1500 Fair Oaks Ave, South Pasadena, CA 91030