

Coleman School H.S.A.
Check Request for Outside Vendor

____/____/____

\$ _____

Use this form to request a check payable to an outside vendor.

Date: _____

Your Name: _____

Email: _____

Committee or Event name: _____

Payee Information (Organization to whom check should be made payable):

Payee Name: _____

Amount Due: _____

Description/Purpose: _____

Invoice/Order Date: _____

Invoice will be coming in mail _____ **OR** Invoice attached _____

Please place completed form in the Treasurer's Mailbox in the Coleman Office
attn: Barbara Campbell