



CHECK REQUEST

Payee: _____
Return all checks to LOSH Requestor

Amount of Payment: \$ _____

All Receipts Attached? _____

Charge to - Guild Name: _____

Guild # _____

Requested and Authorized by: _____

Date: _____

Budget Category: _____

Purpose: _____

- Submit original, with supporting documents to SHJC accounting office via accounting file folder in mail room.
- Pick up original check from guild folder; allow one week for processing.
- Maintain copies for guild record book