School District #22 (Vernon)
GENERAL CHEQUE REQUEST

Date _____ Payee phone number _____

Make cheque payable to: _____

Address: _____

_____

Amount : $_____ GST claim $0
(total claim)

***If more than one account to be charged – give breakdown**

Account number: _____ $ _____

Account number:_____ $ _____

Description of expense: _____

AUTHORIZATION: Staff : _____
(Staff member requesting the payment be made)

PVP / Manager: _____

Appropriate supporting documentation must be provided for the entire amount requested.