

AVINGER ISD
CHECK REQUEST
2009 – 2010

DATE: _____

Amount of check: _____

Date needed: _____

Pay to the order of: _____

Requested by: _____

Organization: _____ For: _____

Number of adult meals: _____ Total: _____

Brk. \$7.00

Lunch \$8.00

Dinner \$10.00

Number of student meals: _____ Total: _____

\$5.00 per meal

Received By: _____
Signature

APPROVED BY: _____ DATE: _____

REMEMBER TO HAVE THE STUDENTS SIGN FOR MONEY AND RETURN IT TO SUPERINTENDENT'S
OFFICE.