

Los Paseos Home & School Club
Check Request/Reimbursement Request Form

Check payable to:

Total Check Amount:

Date:

Description:

When check is issued please (check one):

- Put in my box Mail to:
 Other _____

If reimbursement, please itemize receipts:

Receipt (store):	Amount:	Reason/Event/Grade/etc.

President's approval: _____ Date: