

## PAYMENT REQUEST FORM (updated 11/2021

Step #1: Genera	I Information					
PAY TO:		AMOUNT:		\$		
		DATE REQUESTED:				
ADDRESS:		DATE REQUIRED:				
		EMAIL ADDRESS:				
		PHONE #:				
5,755,755	Г					
EXPENSE DESCRIPTION:						
REQUESTED BY:						
REQUEST FOR:	OOHS BAND OOHS CHOIR OOHS ORCHESTRA OOHS THEATER POPARTS EXPENSE					
(check one)	OOMS BAND OOMS CHOIR OOMS ORCHESTRA					
DISTRIBUTION: (check one)	School Mailbox, Check One - OOHS OOMS					
	Pick Up at OOHS Main Office					
	U.S. Mail – did you fill out the address box above?					
	Zelle;					
EVDENCE DECEDIBLIA	Zelle Email Addr				ets or other supp	 orting documentation.
EXPENSE DESCRIPTION	JN. Flease attach rec	julieu receipts,	IIIVOICE	es, contra	cts of other supp	orting documentation.
Step #2: Directo	r Approval					
Please note how this was ful	nded including description:					
BUDGET ITEM:		FUNDRAISER/OTHER:				
DIRECTOR SIGNATUL	RE:					
Step #3: Pop Ar	ts Treasurer Com	nments				
Comments:						
Check # Date Issued						
Or						
Zelle Conformation #Delivery Date						
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