

**TORREY PINES HIGH SCHOOL FOUNDATION**

**FUND DISBURSEMENT REQUEST**

*INSTRUCTIONS TO ACCESS FUNDS:*

1. Please complete this form which serves as the foundation's document of payment.
  2. Attach all invoices with the vendor's name, address and phone number. A credit card statement is not a sufficient invoice. Receipts must be itemized.
  3. Staple the copy of the invoice(s)/receipt(s) to this form.
  4. Keep of a copy of the invoice(s) and the form for your records.
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***Please print***

Group Requesting Funds: \_\_\_\_\_

Amount Requested \_\_\_\_\_ Date Requested: \_\_\_/\_\_\_/\_\_\_ Date Due: \_\_\_/\_\_\_/\_\_\_

This request is part of the approved budget for the current school year. \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, please explain why funds are being requested. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Mail Check \_\_\_\_\_ Hold for Pick-up \_\_\_\_\_ Place in Staff Mail Box

Make check payable to:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_

Brief description of invoice(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Authorized Liaison Signature

Date