BOARD OF EDUCATION



Jorge E. Diaz, Superintendent

MIDDLESEX COUNTY MAGNET SCHOOLS STUDENT ACTIVITY FUNDS STATEMENT OF RECEIPTS AND DISBURSEMENTS

REQUEST FOR PAYMENT BY CHECK:	
School	
1. Name of Individual Making Request	
2. Payee's Name	
3. Amount \$Numerically	Alphabetically
4. Purpose of Payment	
5. Date of Request	
6. Name of Club Activity, ect.	
7. Check Number	
SUBMIT AT LEAST 24 HOURS IN ADVANCE. SUBMIT WITH INVOICE.	
	Principal's Signature