Christ the King Catholic Community CHECK REQUISITION P.T.O.

	nt: \$		Date:
ayable to:		Check	one:
			Mail
			Leave for pick up
-			Return to
	Amount	Explanation/Description:	
41-7748	Ex. \$18.42	Staples/Back to School Bash Po	ster
	·		
			8

(Please attach original receipts and make a copy for your records. Turn in to the Treasurer box located in the copy room. It may take 1-2 weeks or less depending on the circumstances.)

Ministry Deposit Slip 41-6748 PTO

Name	Account	Check # or Cash receipt #	Amount	Donation (Y/N)
				n
20's = 10's =				
5's = 1's =				
½'s = Q's =				
D's = N's =				
P's =				
		Checks		
		Cash		
		Total Deposit		
Deposited By:		Date:		
Posted By		Date		

Deposit Slip Classroom Money

Room Funds Account	Name of Family	Check # or Cash Receipt #	Amount
54 – 41-6930 PreK			
53 - 41-6930 KN			
55 – 41-6930 1 st Grade			
56 - 41-6930 2 nd Grade			
57 – 41-6930 3 rd Grade			
58 – 41-6930 4 th Grade			
59 - 41-6930 5 th Grade			
60 – 41-6930 6 th Grade			
61 – 41-6930 7 th Grade			
62 – 41-6930 8 th Grade			
	C	Checks	
	Cash		
	Т	otal Deposit	
(Circle or highlight the	correct ac	۔ count aboy	ve)

Deposited By:		Date:
Posted By		Date

CHECK REQUEST Room Funds Check Request

Total Amount: \$	Date:	
Payable to :	Check One: _	Mail
		Leave for pick up
		Rtn to
Account #44-7738 Room Rep Funds:*		
☐ 54 — PreK		
□ 53 – KN		
☐ 55 – 1 st Grade		
☐ 56 – 2 nd Grade		
\Box 57 – 3 rd Grade		
☐ 58 – 4 th Grade		
☐ 59 – 5 th Grade		
☐ 60 − 6 th Grade		
☐ 61 − 7 th Grade		
☐ 62 − 8 th Grade		
Please check the a	appropriate box above.	
Explanation/Description:		
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Signature of Individual Making Request	Approved By	

*Room Rep Funds require approval from Principal.