

SEBEKA HIGH SCHOOL
STUDENT ACTIVITY FUND

CHECK DRAWING ORDER

DATE REQUESTED _____ AMOUNT\$ _____

DATE NEEDED _____

Payable to (Attach Invoice) _____

For _____

Account being charged _____ Acct. Code _____

Is hereby authorized _____

Student Signature

Advisor Signature

(Office Use)

Batch No. _____ Voucher No. _____

Principal Signature

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