Fundraiser Event# _____

KAMEHAMEHA SCHOOLS

KAMEHAMEHA SCHOOLS STUDENT ACTIVITIES – HAWAIʻI
CHECK REQUEST FORM

Date:_____ Needed by:_____

Club Account:_____

Check payable to:_____

Address:_____

City, State, Zip:_____

☐ Athletics Department
☐ Elementary School
☐ Middle School
☐ High School
☐ Bishop Memorial Chapel

☐ Payment

☐ Advance

Event *Ex. (Senior Lū'au) (Car wash fundraiser)*	**Expense Description/Use** *(Food) (Car wash supplies-soap, towels, buckets)*	**Amount**	**Expense Type** *(Meals) (Fundraiser-Cost of Sales)*

All invoices and/or receipts are attached and are dated within 30 days of purchase. Receipts and invoices dated after 30 days may be considered a personal benefit with the amount added to your payroll income. Advances must be settled within 10 days of the event's conclusion. Payment made to other KSH Student Activity Clubs will not generate a check; process will occur as an internal transaction. Please provide self-addressed stamped envelope if you want check mailed out by Fiscal. Otherwise, email notification will be sent to Requestor when check is ready for pick-up at Fiscal Office.

TOTAL $_____

Required - Requestor: _____
Print Name Signature Date Email

Required - Approved by: _____
(Coach / Advisor / Student Activities Coordinator) Date

Required - Approved by: _____
(Department Head) Date

Required - Approved by: _____
(Director of Campus Operations) Date

Approved by: _____
(Office of Poʻo Kula) ***If amount is more than $5,000.00, approval required**** Date

By your signature, you are certifying that you have reviewed the transaction and related documentation and they conform to Kamehameha Schools (KS) policy and that the transaction is within budget, free from known conflict of interest and in the best interest of KS.

Fiscal Use Only	Rec'd Date:	Expense Acct:
	Paid Date:	Amount:
		Check or JE No.:

REVISED 07/2016