



MOUNT LEBANON
BAND BUILDERS

__ STUDENT
__ GENERAL

Mt. Lebanon Band Builders Check Request

THIS DOCUMENT FOR BAND BUILDERS USE ONLY

ACTIVITY _____ CONTACT _____ DATE _____
PHONE _____

PAYMENT INFORMATION

PAYEE NAME _____

COMPANY NAME _____

ADDRESS _____ CITY, STATE, ZIP _____

LINE	DATE	DESCRIPTION	AMOUNT	CHECK #
1				
2				
3				
4				
5				
6				
TOTAL				

COMMENTS (FOR SERVICES, PROVIDE DATE & BRIEF DESCRIPTION OF THE SERVICE PROVIDED)

CHECK DISTRIBUTION

DATE REQUIRED _____ MAIL CHECK TO PAYEE PAYEE WILL PICK UP
 PAYEE REP. TO PICK UP REP. NAME _____

AUTHORIZED SIGNATURES

PAYEE	SIGN	DATE
AUTHORIZED SIGNATURE	SIGN	DATE
TREASURER	SIGN	DATE