Check Request

Etudes
By Educators for Educators

Please make check payable to: _____

Mail check to:

Name: _____

Address: _____

_____

City/St/Zip: _____

Purpose/Purchase:

☐ Books/Publication Order

☐ Conference Registration

☐ Staff Development

☐ Other: _____

Explanation of Expense	Amount
Total Amount	$0.00

Please attach appropriate invoices or price estimates.

Submitted by: _____Date_____

Authorized by: _____Date_____

Vivie Sinou, Executive Director

FOR ADMIN USE ONLY

Check Date: _____ **Processed by:** _____

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