

**Patrick Henry High School Foundation  
6702 Wandermere Drive  
San Diego CA 92120**

**Check Request**

Requested by:	Date:
Club / Team / Class:	
Payable to:	Amount:
Address:	
Purpose:	

My signature below attests that all information is factual and honestly presented, and that the payee is entitled to payment by the Patrick Henry High School Foundation as requested.

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

G Invoice / receipt attached

Treasurer Use Only:		
Check Issued: Date: _____	Check No _____	By: _____