

For Treasurer Use Only:

Ck: _____

Date Paid: _____

Amount: _____

Account: _____



**Lancer Booster Club
Authorization for Payment**

Check to be drawn from this account: _____

Check payable to: _____

Mailing Address: _____

City, State, Zip: _____

The above check is in payment of the following:

Invoice # _____

Description:

Purpose:

Please return the check to me in my mailbox: _____

Please mail the check to the address shown above: _____

Signature of Advisor

Date

Please attach 2 copies of supporting original invoices or sales slips.