

**MADISON DISTRICT PUBLIC SCHOOLS
26550 JOHN R
MADISON HEIGHTS, MICHIGAN 48071
(248) 399-7800**

CHECK REQUEST FORM

BUILDING _____ DATE _____

REQUESTED BY _____

ACCOUNT NUMBER _____

ACCOUNT NAME/FUND _____

PURPOSE _____

MAKE CHECK PAYABLE TO:

VENDOR NUMBER
(FOR OFFICE USE ONLY)

QUANTITY	ITEM DESCRIPTION	PRICE EACH	TOTAL
		TOTAL	
	TOTAL AMOUNT		

COMMENTS _____

Please make a copy for your records.

SIGNED BY _____
Building Principal/ Department Supervisor

Superintendent of Schools