

DISBURSEMENT FORM – Home and School

PLEASE ATTACH ALL RECEIPTS and APPROVALS

Turn in form to school office secretary

Date: _____ **Amount:** _____

Requested By: _____ **Location:** SWC SMC SJC

Pay To: _____

Payee Address (if to be mailed): _____

Notes/Description:

How will check be handled?

- Mail
- Return to requester
- Other: _____

Business Office Only:

- Anick please return check to: Mary Jo Bartelt 221 S Hartwell Ave. Waukesha, WI 53186