

Van Vleck I.S.D. Activity Fund  
Check Voucher

Date: \_\_\_\_\_

Account Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

Total Amount Requested: \_\_\_\_\_

Check Made Payable To: \_\_\_\_\_

For: \_\_\_\_\_

\_\_\_\_\_  
(attach invoice or supporting document)

General Supplies    Instructional Supplies    Student Travel    Teacher Travel  
(circle one)

Approved By: \_\_\_\_\_  
Principal

\_\_\_\_\_  
Sponsor

**Office Use Only**

Check No: \_\_\_\_\_

Date: \_\_\_\_\_

Amt: \_\_\_\_\_