



Fullerton Joint Union High School District

1051 W. Bastanchury Road, Fullerton, CA 92833-2247

REQUEST FOR REVOLVING FUND CHECK

Date: _____ Payee: _____

Amount: _____ Employee ID #: _____

Location/Department: _____

Certificated Payroll: ☐ Classified Payroll: ☐ Travel Advance: ☐ Other: ☐

Description: _____

Reason: _____

Date of Conference: _____

Submitted by (Location): _____

Requested by: _____ Budget #: _____
(Signature)

Please mail check directly to: _____

Return to Location/Requestor: _____

APPROVAL:

Principal/Division Head: _____
(Signature)

Asst. Supt. or Designee: _____
(Signature)

Procedure Routing Steps:

1. Send completed form to Accounting Department - Budget approval
2. Accounting Department submits to Superintendent's Office for approval
3. Upon approval, check will be issued by Accounting Department

Please print a copy for your files