



Fundraiser Event# _____

**KAMEHAMEHA SCHOOLS
KAMEHAMEHA SCHOOLS STUDENT ACTIVITIES – KAPĀLAMA
CHECK REQUEST FORM**

Today's Date: _____ Date Check Needed: _____

Club Account: _____

Check payable to: _____

Address: _____

City, State, Zip: _____

- Athletics Department
- Elementary School, KES Office
- Middle School, ASKMS
- High School, ASKS
- Office of Hope Po'o Kula

Payment

Cash Advance

Event	Expense Description/Use	Amount	Expense Type
<i>Ex. (Senior Lū'au) (Car wash fundraiser)</i>	<i>(Pat's Piggery Food – Inv #14520) (Car wash supplies-soap, towels, buckets)</i>		<i>(Meals-65100) (FR-Merchandise/Supplies-50740)</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL \$ _____

The following support documentation is attached:

- * All invoices & receipts dated within **60 days** of purchase which contains Business name/address, date of purchase, all items purchased and total amount of purchase. Proof of payment required on all receipts. **Receipts and invoices dated more than 60 days after expense incurred may be considered a personal benefit with the amount added to your payroll income.**
- * Roster of all participants covered by expense for meals, gifts, prizes, awards, travel, and admission or fees for events/activities.

APPROVED:

By my signature below, I certify that I have reviewed the transaction and related documentation and they conform to Kamehameha Schools (KS) policy and that the transaction is within budget and in the best interest of KS.

- * **If an actual or potential conflict of interest or personal/business relationship with the above named payee (or in the case of an expense reimbursement, with any of the vendors indicated on the attached receipts for reimbursement) exists, Club Advisor shall contact Student Activities Accounting PRIOR TO SUBMISSION OF THIS REQUEST FOR MORE INFORMATION.**

Required Signatures:

Conditional Signatures:

Club Advisor – Print Name Signature Date

Principal/Director *Signature required if Total over \$5,000

Department Head/Athletic Director Signature Date

Headmaster *Signature required if Total over \$25,000

Dean-Student Activities/Student Activities Coordinator Date

Accountant Use Only	Issue Date:	Frequently Used Expense Types:	
Expense Acct / Amount:		50600 · Concession Expense	65100 · Meals & Refreshments
		50740 · FR-Merchandise/Supplies	65220 · Supplies
		65030 · Decorations & Favors	65300 · Uniforms & Apparel
		65040 · Entertainment	68322 · Travel-Lodging
		65060 · Gifts, Prizes & Awards	68326 · Travel-Transportation