Sweetwater Union High School District Associated Student Body

School			
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PETTY CASH PRIOR APPROVAL FORM

A. REQUEST for Approval:	
Date Submitted:	
Club/Trust: Amount Requested:	
Description of Need:	
Signature of Club Representative Signature of Club Advisor or Coach	
Note: Original invoice or receipt must be turned in to the ASB after purchase and attached to this	s form.
(For ASB Use Only)	
B. ASB Action:	C. Date Receipt Rcvd:
□ Request Approved □ Request Denied Date:	Rcvd by:
Charge to ASB general ledger acct name & number:	
Charge to ASB general ledger acct hame a number.	
Signature of ASB Student Representative Signature of AP/ASB Advisor	Signature of Principal
FORM: 4510 07/2019	
Sweetwater Union High School Distric	ct
Associated Student Body	
School	_
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