

**BONITA HIGH SCHOOL
ASSOCIATED STUDENT BODY
REQUISITION FOR FUNDS**

Date _____

PO # _____

Make check payable to: _____

Address: _____ Zip Code _____

Account Number and Name _____	Amount _____
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Description: _____

Request for:
____ Purchase Order Only
____ Purchase Order to be Mailed
____ Check to be mailed
____ Check to be picked up by _____

Approved by:

Faculty Sponsor

Group President or Treasurer

Director of Student Activities