

Killeen Independent School District Advance Payment Request

Request an advance payment for the following purpose(s):
Note
Please state above the activity, location of the activity, date and times of the activity.

Source of Funds	
Account Title and Number	Amount

Agreement
<p>1.I will use this money exclusively for the above stated activity.</p> <p>2.I will not use this money to make cash payments to judges, officials, or other authorities.</p> <p>3.I will return the unused portion of this money along with all supporting documents for expenses to the school financial clerk immediately after returning from the activity stated above.</p> <p>4.By signing, I agree to all the terms above.</p>

/ /

 Date

/ /

 Date

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Approved
Disapproved