

**AUBURN SCHOOL DISTRICT NO. 408**

915 4th NE, Auburn WA 98002

253-931-4930

**Revolving Check Request**

<b>Fund:</b>	<b>School/Dept.:</b>
<b>Date:</b>	<b>Account Code:</b>

<b>Payee Name and Address (One Person or Company per Form)</b>		<b>Explanation (Attach Original Subscription Form, Invoice or Receipt)</b>
	\$0.00	

<b>TOTAL:</b>	<b>\$0.00</b>	<b>CERTIFICATION:</b>  I hereby certify under penalty of perjury that this is a true and correct claim as described and that the claim is just, due and an unpaid obligation of Auburn School District No. 408.
		<b>Claimant (sign above) Date</b>
		<b>Principal/Supervisor Date</b>
		<b>Auditing Officer</b>