

# W.O. Mitchell School Council

## FLOAT REQUEST

DATE: \_\_\_\_\_

AMOUNT: \$ \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_

DATE REQUIRED: \_\_\_\_\_

EVENT: \_\_\_\_\_

### BREAKDOWN REQUIRED:

	No.	Total \$		No.	Total \$
\$100			\$2		
\$50			\$1		
\$20			\$0.25		
\$10			\$0.10		
\$5			\$0.05		

Total Float \$ \_\_\_\_\_

OTHER COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

APPROVED BY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

ISSUED BY TREASURER: \_\_\_\_\_

DATE ISSUED: \_\_\_\_\_

CHEQUE NO.: \_\_\_\_\_