

**JOHNSON CITY CENTRAL SCHOOL DISTRICT
STUDENT ORGANIZATION ACCOUNTING FORM**

5210-E.2

PAYMENT ORDER TO THE CENTRAL TREASURER

[ORDER NUMBER: _____]

SCHOOL: _____

DATE: _____

You are authorized to issue a check:

CHECK NO. _____

PAY TO THE ORDER OF _____

IN THE AMOUNT OF _____ DOLLARS \$ _____

FOR _____

AS PER ATTACHED INVOICE

CHARGE SAME TO _____ ACCOUNT

DATE APPROVED: _____

DATE POSTED: _____

VERIFICATION OF AVAILABLE BALANCE BY FACULTY ADVISOR:

Available Balance: \$ _____

Amount of this Payment Order: \$ _____

New Available Balance: \$ _____

Activity Treasurer: Signature: _____ Date: _____

Faculty Advisor: Signature: _____ Date: _____

Central Treasurer: Signature: _____ Date: _____

**CC: Activity Treasurer
Organization File**

[Date of Board Approval: June 13, 2006 - Johnson City Central School District, Johnson City, NY]