## STUDENT FUNDRAISING + SCRIP FAMILY ACCOUNT **REQUEST FORM**

DATE:	
NAME:	GRADE:
REQUEST	
PLEASE USE:	
\$	from my Student Fundraising Account
AND/OR	
\$	from the SCRIP Family Account
TO PAY FOR: _	
Please have the KCS	NDS IN ACCOUNTS  Accounting Department confirm there is enough money in your sequest before having your parents sign below.
KCS ACCOUNTING	CONFIRMATION
	\$ in your <b>Student Fundraising Account</b> .  not enough money in your <b>Student Fundraising Account</b> .
	\$ in your SCRIP Family Account. not enough money in your SCRIP Family Account.
KCS OFFICE:	DATE:
PARENT'S SIGNATUR	E DATE