**Matsunaga/Longview PTA Check Verification Form**

**Please complete the attached form and return to**

**Ann Gordon with the checks.**

**\*make sure you have two verification signatures before returning form**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Received From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Total For Checks $\_\_\_\_\_\_\_\_\_\_\_\_\_**

Verification:

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Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_