

# LSJE, LLC

6100 Red Hook Quarters, Suite B-3, St. Thomas, VI 00802-1348

Phone: [REDACTED] E-mail: [REDACTED]

## Check Request Form

Date of Request:	<input type="text" value="12/05/18"/>	Amount Requested:	<input type="text" value="\$1,949.35"/>
Payee:	<input type="text" value="Professional Electrical Supply Specialists"/>	Payee Address:	<input type="text" value="[REDACTED]"/>
Payee Contact:	<input type="text" value="[REDACTED]"/>		

Check box if GL coding is split

Invoice N./Memo:	<input type="text" value="Invoice 20966 / Ticket 12516"/>	GL Memo:	<input type="text" value="x 1 Circuit Panel/x1 Pole Breaker/x 1 20A Breakers, Electrical Wire - Desal Feed - GSJ"/>
GL Description:	<input type="text" value="Electrical"/>		
GL Code:	<input type="text" value="60155d"/>		
GL Amount:	<input type="text" value="\$1,669.50"/>		

Invoice N./Memo:	<input type="text" value="Invoice 21195 / Ticket 15693"/>	GL Memo:	<input type="text" value="x 1 2-Pole Breaker - Electrical Repair - LSJ Cabanas"/>
GL Description:	<input type="text" value="Electrical"/>		
GL Code:	<input type="text" value="60155d"/>		
GL Amount:	<input type="text" value="\$35.00"/>		

Check box if additional pages are included

Other Notes/  
Instructions:

Date Approved by Manager:

Manager Signature: