Check Request Form (11/3/17)

| Approved: | Minutes of | | | | | |
|----------------|-------------|-------------------------|----------|-------|-----------------|--|
| Fund Raising | or Operatin | g Fxnense: | | | | |
| _ | <u>-</u> | ☐ Testimonial | Dinner 🗆 | Other | ☐ Operating | |
| Ε | (Other Eve | ent) | | | | |
|] | □ Misc | | | | | |
| Requested by: | | | | | Date: | |
| | | E-mail: | | | Phone: | |
| Chair Approval | · | | | | | |
| | | E-mail: | | | Phone: | |
| Check Detail: | Payee: | | | | Amount: | |
| | Memo: | | Pur | pose: | | |
| | Delivery: | Delivery: 🗆 By Mail 💮 🖺 | | | ☐ Hand Deliver: | |
| | То: | | | | | |
| | Address: | | | | | |
| | | | | | | |
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