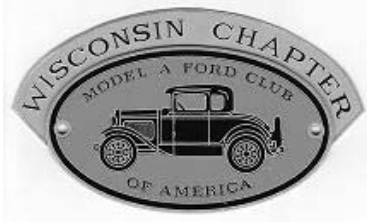


REQUEST FOR CHECK



* TODAY'S DATE: _____

* CHECK PAYABLE TO: _____

* ADDRESS: _____

*

* EVENT/PURPOSE: _____

*

Itemize Expenses and Attach Receipts

Amount

TOTAL	

Signature

Required _____

* Required entry. Staple all receipts to this form. Sign the completed form and submit it to the Treasurer by the 15th of the following month.

Rev. June 2014