

Check Request

Date submitted	
Write check in t	he amount of \$
Payee's name and address:	
Attach receipts	and copy of contract, if applicable.
Event	
Event date & loc	cation
club budget) E	gory, of reimbursement requested. (Expenses should correlate to xample: Membership: postage \$ 8.40, Administrative gifts \$15.00, uts \$10.20 = \$33.60 Total (Must be same as check amount.)
\$	for
\$	TOTAL
If this is a reque information:	est for a deposit on a future event, provide the following
How did you co	mpute the total cost?
Total guarantee	d
Additional payn	nents due:
Date	_\$ Date \$
You may send t	his check request to: Jan Means 948 Virginia St Apt. 101 Dunedin, FL 34698