

Request For Payment

Date: _____

Re: Club Operations
 Club Foundation

(Avenue of Service / Name of Committee)

Purpose: _____
(What was the expenditure for? Ex: advertising, food, repairs, supplies, etc.)

Amount Requested: \$ _____

Credit Card
Check

Please include copies of any receipts or invoices associated with this check request

Make Check out to: _____

Hand Check to: _____

Mail Check: _____
Name / Company Name

Street Address / P.O. Box

City, State, Zip

Requesting Person Name (please print): _____

Requesting Person Signature: _____

Director/Board Member Name (please print): _____

Director/Board Member Signature: _____

TREASURER USE ONLY

Check Number: _____

Date Paid: _____

Issued to: _____

Signature: _____