



## CHECK REQUEST

Check to be picked up:

Check to be mailed:

Check to be mailed with attachment(s):

Program Name/Account Number: \_\_\_\_\_

### Check Payable to:

Name: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Address: \_\_\_\_\_ Date Check Requested: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Date Check Needed: \_\_\_\_\_

Memo for Check:

**Explanation of Expenditure:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Requested By: \_\_\_\_\_ Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Approved By: \_\_\_\_\_

All receipts, invoices or documentation must be attached to this request.

*(Please allow 2 weeks for the processing of your request.)*