



Check Request Authorization Form

Committee Name:	Budget Line – Treasurers Use Only:
Item(s) Purchased (description) and Reason Why Purchased (event):	Check Amount (\$) Requested:
Payable To: (with address if to be mailed by treasurer)	

ALL Receipts MUST be attached, and items circled or highlighted

(1) Chairperson Signature/Date:
(2) Officers Signature/Date:
(3) Treasurer Signature/Date:

For Treasurer's Use Only

Check#:
Check Date:
Delivery Method:



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