Rotary Club of West U

Date: _____

Check Request

Requested by: _____

Purpose: _____

Pay to: _____

Address: _____

Ciry, State, ZIP: _____

Date	Inv #	Description	Amount

Remarks: _____

In Approved Budget: Yes/No _____ :Budget Item

Approved required by Board: Yes/No

Check #: _____

Approval Signature & Date: _____ Date: _____