

ROTARY FOUNDATION OF WASHINGTON, DC
CHECK REQUEST FORM

ENCLOSE THE SUPPORTING INVOICE OR OTHER AUTHORIZING DOCUMENTATION

Date of Request: _____

Requested by: _____

Name of Payee: _____

Street Address: _____

City, State and Zip: _____

Requested payment amount: _____

Please state the reason for this payment in the space below:

Treasurer's Approval: _____

Please mail, along with supporting documentation, to:

Gretchen Kearney
Rotary Club of Washington, DC
1101 16th Street, NW
Level 1C
Washington, DC 20036