Rotary Club of Leesburg / Rotary Club of Leesburg Foundation
Check Request Form
P.O Box 771
Leesburg, VA 20178

DATE REQUESTED: _____	AMOUNT: _____
CHECK PAYABLE TO (name and address): Tax ID (if applicable)	DATE NEEDED: ____/____/____ ☐ Return to individual requesting check ☐ Give check to _____ ☐ Mail by ____/____/____ (date)
DETAILED DESCRIPTION:	

For Use: ☐ Board Vote ☐ Committee Expense ☐ Club Project ☐ Foundation Project ☐ Club Expense ☐ Other ☐ Foundation Expense ☐ Technology

Copy of invoice, receipt or related paperwork MUST be attached to this request form.

MEMBER REQUESTING CHECK:

_____ _____ _____

Name Approval Signature Date

MUST have signed approval from President, Treasurer or Secretary

Approved June 26, 2014