

Check # _____

Estes Valley Sunrise Rotary Club

Check Request

Requested By: _____

Amount: _____

Date Request Submitted: _____

Please Attach Original Invoice or Receipt

Date Needed by: _____

Payee: _____

For: _____

Is this part of the _____ Year Budget? ____ Yes ____ No
(if no, the check may be delayed for Board approval)

Budget Line Item to be charged: _____

Mail (Y/N) _____ or Return check to: _____

Mailing Address: _____

Approved by Committee Chairperson: _____

Check Number: _____ Dated: _____ Amount: _____

Date distributed: _____

Given to _____

Mailed _____