

CHICO ROTARY FOUNDATION  
CHECK REQUEST FORM

Date: \_\_\_\_\_

Requested by: \_\_\_\_\_

Payable to: \_\_\_\_\_

For: \_\_\_\_\_

Amount: \_\_\_\_\_

Foundation account: \_\_\_\_\_

Budget Item: \_\_\_\_\_

Team Captain approval \_\_\_\_\_

Approval \_\_\_\_\_

Date \_\_\_\_\_