

Rotary

District 5890



YOUTH SERVICES CHECK REQUEST

Date of Request: _____

Person Making Request: _____

Rotary Club: _____ Pay Vendor Directly

Telephone Number: _____

Payment Info: _____ Pay as listed below

Pay to the Order Of: _____

Address: _____

Address Continued: _____

Attach All Invoices/Receipts

Event Date	Vendor	Budget Item/Event	Amount
TOTAL			

Approved for payment _____ Date: _____

Check Number _____ Date Written _____ Initial _____

**Submit to: New Generation District 5890 Treasurer, Pamela Hunt,
2305 Hutchins Ln, El Campo, TX 77437. PHunt@ecmh.org
979-240-8586**