



Request For Check

Please issue check to:

Name:	In the amount of: \$ -		
Street Address:	Due Date:		
City:	State:	Zip:	

Account Number	Notes	Amount \$	Vendor	Invoice Date	Reason	Approved By:	Approval Date

These are budgeted items and fall within the approved budgeted amount or has been approved by the Elder Board or Finance Committee		Requested by:	Date:
Yes:	No:	Check Number:	Date:

Explanations of Expenses

Date	Amount \$	Expense Type	Place/Description	Attendees	Business Relationship	Business Purpose

Expense Types	
M	Entertainment/Business Meals
O	Other Expenditures