## Friendship Star Quilters Check Request

Pay to the order of (please print clearly) Name \_\_\_\_\_ City State Zip +4 E-mail \_\_\_\_\_ Purpose of check \_\_\_\_\_ Attach original receipts or invoices. To expedite payment, you may sign, scan this request and invoices/receipts for email submission, then mail or deliver in person the originals to the treasurer. If multiple items, please itemize here: \_\_\_\_\_ \$\_\_\_\_ \$ \$\_\_\_\_\_ **Total amount of check:** \$ **Requested by:** Name (printed) \_\_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_ Phone \_\_\_\_\_ Approved by: (expenses of \$300 or more, and ALL contracts, require the signature of two elected officers: 1. Officer Signature \_\_\_\_\_ Date \_\_\_\_ 2. Officer Signature \_\_\_\_\_ Date \_\_\_\_ Accounting \$ \_\_\_\_\_ GL account \_\_\_\_\_ Class \_\_\_\_\_ \$ \_\_\_\_\_ Class \_\_\_\_\_ Split \_\_\_\_\_ Split \_\_\_\_\_ \$\_\_\_\_\_ Class

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