

# RMHS ATHLETIC BOOSTER CLUB – CHECK REQUEST

Name of person requesting check: \_\_\_\_\_

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

Tel: \_\_\_\_\_

Email: \_\_\_\_\_

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

Reason/purpose:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Authorization for team fund use [if applicable]:

Team: \_\_\_\_\_

Name of Coach [printed]: \_\_\_\_\_

Signature of Team Coach: \_\_\_\_\_

Check made payable to: \_\_\_\_\_

Address to be mailed to:

\_\_\_\_\_  
\_\_\_\_\_

All check requests must be submitted with appropriate receipts or other supporting documentation!

Questions?

Contact Jill Holmes, Treasurer, at [momoholmes@hotmail.com](mailto:momoholmes@hotmail.com)

For Treasurer use only:

Check # \_\_\_\_\_ Date issued: \_\_\_\_\_

Charged to: \_\_\_\_\_

Recorded: \_\_\_\_\_