|  |
| --- |
| Check Request Form |
| Date |  | **Requested By:** |  |
| **Date Required** |  | Description |  |
| **Team** |  | Type | Tournament Referee [x] Other [ ]   |
|  |
| **Payable To:** |  |
| **Address:** |  |
| **Amount** |  | Check #(Treasurer use Only) |  |
| **Send Check:** | To Address: [x] To Manager: [ ]  Address:       |

**Notes/Special Instructions:**

**Approval:**

**Over $ 500 not in budget: President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Over $ 1000 Board: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**

**E-Mail Check Request to: kpempek@comcast.net or**

**Dynamo FC – Administrator 7227 Indian Lake Road, Indianapolis Indiana 46236**

### Include all backup information and or original receipts with the request