

Salisbury University Campus Recreation Department

SPORT CLUB CHECK REQUEST FORM

Sport Club _____ Today's Date _____

Check one: Reimbursement to Club Member Need Check to Pay Vendor
Check one: Mail to Payee Hold for Pick-Up

PLEASE NOTE:

- You must attach an invoice or receipt to this form.
- The person requesting the check and the name of payee cannot be the same person.
- All checks must be requested within 5 days of receiving invoice.

PLEASE PRINT

Officer Requesting Check:	
Officer's Email Address:	Officer's Telephone Number:
Total (\$) Amount of Purchase:	
Description of Purchase:	

Name of Payee: <small>(To whom you want the check made payable to.)</small>
Address of Payee:
Telephone Number of Payee:

Signature of Officer:
Approval of Recreational Sports:

FOR OFFICE USE ONLY:	
Amount: \$	Date Entered:
Check #:	Date Mailed:
Check picked up by:	