

Check Request Form

Date Needed:		-	<i>2</i> -		9			
Person requesting:		strong a sure of the sure of t	8 °	2				9
Make check payable to:		-	9			ST - 84		
Amount of check \$						1 6		
Charged to what budget item:	25	2 25		S S.		5		
Purpose:								
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Signature of requester:								
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Note: If item has already been purchased, please attach receipt(s) to this form. Otherwise, provide receipt(s) as soon as possible after purchase.