

# GFWC – Gun Lake Area - Check Request Form

Pay to: \_\_\_\_\_ Date \_\_\_\_\_

Mail to: \_\_\_\_\_ Amount: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Reference required on check: \_\_\_\_\_

Invoice/receipt attached \_\_\_yes \_\_\_no

If no, payment reference \_\_\_\_\_

Check attachment required? \_\_\_\_\_

Budget Account to charge: \_\_\_\_\_

If not budgeted: Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Remaining Budget for this account: \_\_\_\_\_

Submitted by: \_\_\_\_\_



**To be completed by treasurer:**

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

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

Delivered to: \_\_\_member/\_\_\_\_\_ or \_\_\_mailed

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_