

**IFRW****Check Requisition**

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

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

Amount: \$ \_\_\_\_\_

Check payable to \_\_\_\_\_

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

\_\_\_\_\_ Phone #: \_\_\_\_\_

Description of Goods or Services: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approved by: \_\_\_\_\_

Expense charged to: \_\_\_\_\_

•White to Treasurer	•Yellow to President	•Pink to Budget & Finance
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*(Attach documentation/receipt to treasurer's copy)*