

Dr. Vincenzo Sellaro Lodge #2319

Check Request Form

All receipts and relevant information must be attached to the back of this form for payment to be processed.

Financial Officer Use Only

Check # _____

Date _____

General Meeting

Council Meeting

Other _____

Amount _____

Payee _____

Return check to payee

Mail check with enclosed envelope

Return check to: _____

Committee / Expense _____

Reason / Comments _____

Budgeted Expense Yes No

Authorization

No checks will be written without the prior approval of the lodge president

Chairperson or Financial Secretary's Signature _____

President's Signature _____