

**Sonora Raiders Aquatics Booster Club, Inc.**  
**Check Request Form**  
 (Attach All Receipts or Invoices)

Check No. \_\_\_\_\_

Check Payable To:

Applies To:      Boys Water Polo    \_\_\_\_\_  
                          Girls Water Polo    \_\_\_\_\_  
                          Swim/Dive            \_\_\_\_\_  
                          All                        \_\_\_\_\_

Check Amount:

Approved in Budget:

Approved Online:

Requested By:

Board Position:

Request Date:

Check Due Date:

For Mail or Pick-Up:

Mailing Address

**Reason for Check Request**

**List Each Invoice Separately**

Vendor Name	Program	Description of Expense	Amount
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

**TOTAL** \_\_\_\_\_

**FOR TREASURER'S USE ONLY**

Request Received Date: \_\_\_\_\_ Check Number: \_\_\_\_\_  
 Date Approved by Board: \_\_\_\_\_ Check Date: \_\_\_\_\_  
 Treasurer's Signature \_\_\_\_\_ Date: \_\_\_\_\_  
 Received From: \_\_\_\_\_ Attached Invoices/Receipts? \_\_\_\_\_