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|--------------------|
| Treasurer's Notes: |
| Dep Date: _____ |
| Deposit #: _____ |

Elkins ProGrad Check Request Form
(To be used when requesting check from the Treasurer)

| | |
|------------------------------|--------------|
| Prgm/Expense category: _____ | Date: _____ |
| Form Preparer: _____ | Phone: _____ |

Check Information Needed

Date of request form: _____

Date check needed by: _____

Check made payable to: _____
(Name & Address needed) _____

Amount of check \$ _____

Business purpose of ck: _____

Signature of requester: _____

Note: If item has already been purchased and you are requesting reimbursement, please attach receipt(s) to this form. Otherwise, provide receipt(s) within 5 days after purchase. Pre-approval must be obtained on all purchases verbally. Failure to obtain pre-approval may result in purchaser having to incur the expense. Please document below the name of the approver. Only ProGrad Executive Committee and Committe Chairs have the authority to approve expenses.

Name of Approver: _____

FOR TREASURER'S USE ONLY

Date check issued: _____ Check # _____

Charged to what budget: _____

Comments: _____

Treasurer's signature: _____