



Club/Organization Name: [Redacted] **ADVISOR:** [Redacted]

Agency Account #: A [Redacted]

Today's Date: [Redacted] Mail Check

Check Request Date: [Redacted] Check for pickup by

Purpose of Request: [Redacted]

PAY TO (see #2 below):

NAME [Redacted] **Federal ID#** [Redacted]

ADDRESS [Redacted]

[Redacted] **MGSC ID#** [Redacted]

Is this Expense noted in the club minutes? Yes No

NOTE:

Form Completed by:

[Redacted] [Redacted]
Printed name Signature

Clu7(9860 R (O) i TJ ET EMC /P <<MCID 173 >>BDC Q q 90.72 85.32 396.36 8.76 re W n BT /TT1 1 TF 0.005 Tc -0.005 Tw 7.92 -0 0 7.92 91.8 87 Tm

[Redacted] [Redacted]

[Redacted] [Redacted]

