

# Central California Swimming Request For Check

Request Date:

Payable To	<input type="text"/>				
Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Zip Code	<input type="text"/>
Amount \$	<input type="text"/>	Charge To Account No.	<input type="text"/>		
Or Charge To	<input type="text"/>				
Requested By	Approved By		Check Issued By		
			Check No		

Description of Expense:

(cut along dotted line)

## Request for Check - Instructions

1. Complete the Form as follows:

**Date** - Date of the Request

**Payable To** - The name of the person or company to whom funds are to be disbursed

**Address, City, State and Zip Code** - Mailing address of the person or company to whom funds are to be disbursed

**Amount \$** - The amount of the disbursement

**Charge To Account No.** - The CCS General Ledger account number to which the expense will be charged. Usually left blank and used by the CCS Treasurer

**Or Charge To** - General description of expense area, e.g. Postage, Zone Team Bus, etc.

**Requested By** - Signature of individual making the request for check

**Approved By** - Signature of CCS Officer who has budget authority

**Check Issued By, Check No** - Leave blank, they are for internal use by CCS Treasurer

**Description of Expense** - Detailed explanation of the nature and justification for the expenditure

2. Attach copies of all receipts to be reimbursed or original invoices to be paid directly

3. Forward completed request to:  
Chad Bringe, Treasurer  
3237 W Sunnyside Ct  
Visalia, CA 93277-7198  
email: cbringe@hotmail.com