Wisconsin Chapter Request For Check

Date: _____

Make Check Payable To: _____

Address: _____

_____

04202004

Event/Purpose:

Itemize Expenses Below & Attach Receipts	Amount	
TOTAL		

Signature Required X

Before submitting Check Request make sure that the following is done.

- ☐ The event that the money was used for is filled out in the Event/Purpose Box.
- ☐ Items purchased listed in the left column, amounts listed in the right column.
- ☐ Staple all of the receipts for this check request to this form.
- ☐ Sign the bottom of the check request form.
- ☐ Requests for payment need to be submitted within 6 months.

Check Request forms that do NOT identify purpose/event, include receipts or identify person requesting will be required to be presented at official Board of Directors (BOD) meeting for BOD vote to accept or deny payment. Results of BOD vote will be signed and noted by Wisconsin Chapter President on request form. Additional check request forms can be obtained from Board Members or the Chapter's web site at *http://clubs.hemmings.com/wichaptmafca*

Send everything to the treasurer - call with any questions before sending. The current treasurer's address and phone number can be found in the front of the latest newsletter.