

**MT. VERNON ATHLETIC BOOSTERS  
REQUEST FOR CHECK**

**DATE:** \_\_\_\_\_

**COACH'S NAME:** \_\_\_\_\_

**TEAM:** \_\_\_\_\_

**NAME OR COMPANY (TO BE PLACED ON CHECK):** \_\_\_\_\_

\_\_\_\_\_  
**ADDRESS (TO BE MAILED TO):** \_\_\_\_\_

\_\_\_\_\_  
**AMOUNT:** \_\_\_\_\_

**ACCOUNT NUMBER:** \_\_\_\_\_

**DESCRIPTION:** \_\_\_\_\_

**FUNDS TO BE PAID FROM:**

**TEAM SPECIAL ACCOUNT** \_\_\_\_\_

**PROJECT WISH LIST** \_\_\_\_\_

**OTHER** \_\_\_\_\_

**RECEIPTS ENCLOSED**      **YES** \_\_\_\_\_      **NO** \_\_\_\_\_

**IF NO EXPLAIN** \_\_\_\_\_

**COACH SIGN:** \_\_\_\_\_