

# Kent Skating Club

## Check/Credit Card Request



Date of Request: \_\_\_\_\_

Request By: \_\_\_\_\_

Request Type: \_\_\_\_\_ Check Request

\_\_\_\_\_ Credit Card Request

Name of Payee: \_\_\_\_\_

Payee Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Payment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount: \$ \_\_\_\_\_

Due Date: \_\_\_\_\_

### OFFICE USE ONLY

Check Number: \_\_\_\_\_ Date: \_\_\_\_\_

Processed By: \_\_\_\_\_ Date: \_\_\_\_\_

\* Please attach all receipts, invoices, etc. to this request form  
Submit request to Kent Skating Club Treasurer