

**The Columbus Recreation & Parks Community Recreation Council**  
***Check Request Form***

Chapter Name: \_\_\_\_\_

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

Check Payable To: \_\_\_\_\_

Amount of Check: \$ \_\_\_\_\_

For:

Check the category that best fits:

Awards

Office Supplies

Event Supplies

Petty Cash

Equipment

Program Supplies

Fund Raising

Sporting Equipment

Grants

Sporting Events

Miscellaneous

Sports Supplies

Authorized Signatures:

(Two signatures are **REQUIRED** to process your check request)

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Authorized Signature

Receipts Attached: Yes      No

(Missing receipts must be forwarded no later than 30 days from this request)

\*revised 10-7-09

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