



**Check Request-Club/Organization Form**

Please submit all check requests to an SGA advisor two weeks prior to the date they are needed to allow time for processing.

**To: SGA Advisor: Dawn Allen-Elizabeth City**

**Club Advisor:** \_\_\_\_\_

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

Payable to: \_\_\_\_\_

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

\_\_\_\_\_

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

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

\_\_\_\_\_

\_\_\_\_\_

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

Federal I.D. # \_\_\_\_\_

Club Pres Signature: \_\_\_\_\_

Club Advisor Signature: \_\_\_\_\_

SGA Advisor Signature: \_\_\_\_\_

Club Funds 09-000-00-235000-  
Account #: \_\_\_\_\_

\*\* please attach necessary documentation (receipts, packing slips, service agreements, contracts. etc.). not doing so will delay processing time.