



SRC CLUBS CHEQUE REQUEST FORM

OFFICE USE ONLY

CHEQUE #	COMPLETED BY
----------	--------------

PAYABLE TO	
DATE REQUIRED	NAME OF CLUB
PICK UP LOCATION	<input type="checkbox"/> South Campus <input type="checkbox"/> TD Student Centre
ADDRESS (please provide ONLY if cheque needs to be mailed)	

EXPENSES

NOTE: Please attach any receipts/invoices in order to receive approval, signing authorities cannot sign a cheque request that is payable to themselves.

DESCRIPTION	AMOUNT
TOTAL AMOUNT REQUESTED:	

NOTE: Cheques are issued on **Wednesday only**. Please allow until Thursday for the request to be processed.

APPROVAL

_____ Signing Authority Printed	_____ Signed	_____ Date
_____ Signing Authority Printed	_____ Signed	_____ Date
_____ Faculty Advisor Printed	_____ Signed	_____ Date
_____ Club Liaison	_____ Signed	_____ Date
_____ Manager of Student Experience	_____ Signed	_____ Date
_____ General Manager	_____ Signed	_____ Date