



Monetary Transmittal Sheet

Date: _____

Name: Last _____ First _____ Middle _____

Address: _____

City: _____ State : _____ Zip: _____

Home phone: _____ Business phone: _____

CHECK REQUEST

(attach invoices or receipts)

Committee: _____

Description or Item	Amount
*Mileage (destination): _____ miles @ .50/mile =	
TOTAL	

Make check payable to: _____

Address (if different than above): _____

City: _____ State : _____ Zip: _____

Your Signature: _____ Date: _____

Chair Signature: _____ Date: _____

DEPOSIT

Cash:	
Checks:	
TOTAL:	

Committee: _____

Description: _____

OFFICE USE ONLY:

ck#:	amt:	date:	cat:
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