

Cambridge Jr. Cheer



CHECK REQUEST FORM

Date of Request: _____

Make check payable to: _____

Complete Address Where Check Should be Mailed:

Amount of Check: _____

Purpose: _____

Signature of Requestor: _____

Approval: _____ Date: _____

Email form and receipts to treasurer@cambridgejrcheer.com **OR**
Mail to Linda Olejniczak, 752 Brookshade Pkwy, Alpharetta, GA 30004

*** Checks are written and mailed every two weeks ***

For Treasurer's Use Only

Date Check issued: _____ *Check #* _____

Comments: _____

Treasurer's Signature: _____