



Kiwanis Club of Abilene

Expenditure Request

Type of Request:

- Administrative
- Service

Date of Request: _____

Requested Check Issue Date: _____

Requested Amount: _____

Make check payable to: _____

Mailing Address:
(or delivery instructions)

Reason for Request: _____

Requestor: _____
Individual or Committee

Approvals:

Committee Chairman or Representative

Club President or Representative

For Office Use Only

Date Received _____

Check # _____

Date Issued _____

Acct # _____

Check Amount _____

Club Treasurer or Representative