

**BOBCAT ATHLETIC BOOSTER CLUB  
TEAM ACCOUNTS/BOOSTER BUDGET  
CHECK REQUEST**

**DATE** \_\_\_\_\_

**ATHLETIC TEAM** \_\_\_\_\_

**FUND DISBURSED FROM** (Booster Budget or Team Funds) \_\_\_\_\_

**IF BOOSTER BUDGET, PLEASE SPECIFY:**

**MEAL FUND, SPIRIT FUND, DISCRETIONARY FUND, COACHES CLINIC, COACHES  
CLOTHING OR CAPITAL PROJECT:** \_\_\_\_\_

**COACH SIGNATURE** \_\_\_\_\_

**TEAM PARENT REP** \_\_\_\_\_

**PAYEE** \_\_\_\_\_

**DOLLAR AMOUNT** \_\_\_\_\_

**GIVE CHECK TO OR MAILING ADDRESS:** \_\_\_\_\_

\_\_\_\_\_  
**Attach copies of receipts for the Treasurer. Thank you.**

\_\_\_\_\_  
**President Signature**

\_\_\_\_\_  
**Treasurer Signature**

**Paid Ck#** \_\_\_\_\_ (treasurer use)