



Mail completed form and attach receipts to:  
 AYSO Region 820 ATTN: Treasurer  
 P.O. Box 179  
 Sun City, CA 92586

The Treasurer may be contacted via email:  
 [Redacted] Treasurer@ayso820.org

## AYSO REGION 820 CHECK REQUEST FORM

Date: \_\_\_\_\_ Check # \_\_\_\_\_ (To be used by the Treasurer)

Requested By: \_\_\_\_\_

Check Payable To: \_\_\_\_\_

Check Reimbursement For: \_\_\_\_\_

**Must be Approved Prior to Purchase**

**Estimated Amount for Expense:** \_\_\_\_\_

**Approval for Estimated Amount:** \_\_\_\_\_

(Must be within Budget) Regional Commissioner or Treasurer

CODE#	DESCRIPTION	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>TOTAL</b>		_____

PLEASE ATTACH INVOICE, PURCHASE ORDER, RECEIPT OR ANY OTHER DOCUMENT TO VERIFY  
 PAYMENT OF EXPENSE, AND HAVE APPROVED BY RC OR ARC AND TREASURER. THANK YOU!!

\_\_\_\_\_  
**Regional Commissioner**

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