



Immanuel Crusaders Athletic Boosters
201 W. Graaf St.
Ridgecrest, CA 93555
EIN 82-1878395

CHECK REQUEST/REIMBURSEMENT

Date: _____

Check Payable to: _____

Street Address: _____

City, State & Zip _____

Sport requesting: _____

Check requester: _____

Phone: _____

E-mail: _____

ITEM DESCRIPTION	VENDOR	INVOICE #	AMOUNT
TOTAL			\$ -

(Receipts must be attached)

Treasurer's Notes:

Invoice Received: _____

Date Paid: _____

Check #: _____

Amount: _____

For questions contact Jodi Shadden:

immanuelboosters@gmail.com