

MRA Check Request Form

Today's Date: _____ Date Needed By: _____

Check Requested By: _____ Phone: _____

Check Made Out To: _____ Check Amount: _____

Where Does Check Go? Circle one: Return to Check Requestor Mail to Check Payee

Address (if mailed): _____

Purpose for Check: _____

Budget Line to Be Charged: _____

Approved By*: _____

**Checks must be approved by the Board-designated supervisor of the budget item being charged (see below)*

Rob Schlosser (Pool Maintenance)
Wendy Carlson (Pool Management)
Shannon Butler (Swim Team)

Dale Ludi (Grounds, Tennis, Dock)
Craig Siebel (MRA Clubhouse)
Celena Hale (MRA Clubhouse)

Barry Kelley (Socials)
Sonya Olechnowski (Socials)
Pete Carlson (Admin/Other)

Reimbursement Requests should be submitted to the MRA Treasurer, Melanie Seaton (813-1433; 703 Wormley Creek Dr.)

***** ATTACH DOCUMENTATION (such as receipt or bill) IF POSSIBLE *****

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