

# CROSSROADS OF AMERICA COUNCIL, BSA

PLEASE DRAW CHECK PAYABLE TO: Chuck Sparks

MAIL CHECK TO THE FOLLOWING ADDRESS:

LINE #1: 4225 Indian Pipe Trace

CITY: Indianapolis

STATE: Indiana

ZIP: 46237

\*\*PLEASE INCLUDE ATTACHED DOCUMENTS WITH CHECK TO PAYEE

\*\*OTHER INSTRUCTIONS

0 DO NOT MAIL THIS CHECK - RETURN IT TO: -----  
AT EXTENSION # -----

## CHECK REQUEST FOR THE PURPOSE OF:

(Check appropriate circle or circles as the case may be)

0 CASH FOR EXPENSES OR TO PAY A BILL

PLEASE GIVE BRIEF DESCRIPTION -----

CHECK AMOUNT \$ -----

CHARGE TO ACCOUNT # --- . ----- . ----- O ALL O PARTIAL \$ -----

# --- . ----- . ----- O ALL O PARTIAL \$ -----

# --- . ----- . ----- O ALL O PARTIAL \$ -----

# --- . ----- . ----- O ALL O PARTIAL \$ -----

0 REIMBURSEMENT FOR EXPENSES THAT HAVE ALREADY BEEN PAID FOR BY AN INDIVIDUAL

PLEASE GIVE BRIEF DESCRIPTION -----

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CHECK AMOUNT \$ -----

CHARGE TO ACCOUNT # --- . ----- . ----- O ALL O PARTIAL \$ -----

# --- . ----- . ----- O ALL O PARTIAL \$ -----

# --- . ----- . ----- O ALL O PARTIAL \$ -----

# --- . ----- . ----- O ALL O PARTIAL \$ -----

0 REFUND -- COPY OF RECEIPT ATTACHED

REQUESTED BY ----- APPROVED BY -----

AT EXTENSION # ----- DATE REQUEST APPROVED -----

ACCOUNTING

DEPARTMENT USE ONLY

DATE RECEIVED -----

DATE PROCESSED -----

DATE PAID -----

O COPIES OF ALL ASSOCIATED DOCUMENTS FILED