



**Imperial Royal Sovereign Court of the Desert Empire, Inc.**  
**CHECK REQUEST FORM**

**Date:** \_\_\_\_\_

**Requested by:** \_\_\_\_\_

**Amount requested:** \_\_\_\_\_

**Pay to the order of:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
**(to which check is**  
**to be mailed:** \_\_\_\_\_

**Reason for check:** \_\_\_\_\_

**\*\*\*BACK-UP DOCUMENTATION MUST BE PROVIDED WITH CHECK REQUEST FORM OR FINANCE COMMITTEE WILL NOT APPROVE ANY CHECK REQUISITIONS.**

**Date check written:** \_\_\_\_\_

**Check number:** \_\_\_\_\_

**Account debited:** \_\_\_\_\_

**Account credited (if applicable):** \_\_\_\_\_

**Board of Directors approval:** \_\_\_\_\_