



CHECK REQUEST: CHAPTER FUNDS

Chapter Name: _____

Check amount: _____

Check Recipient
(check payable to): _____

Check Mailing Address: _____

Recipient Phone Number : _____

- How did the chapter use these funds?
- To purchase Comic Books
 - To schedule Trailblazer visit to local school/event
 - To purchase supplies for local TAME Club (Trailblazer Club)
 - For local Math and Science Competition
 - For local Scholarships
 - For planning meeting
 - Other local/chapter/regional program (Please describe)

- Type of Expense
- Food & Beverage
 - Mileage Reimbursement (\$0.50/mile)
 - Program Supplies
 - Office Supplies, postage, copies
 - Facility Rental
 - Scholarship Payments
 - Contract/Intern Payments
 - Other (Please describe)

Notes/Comments

Signature of Authorized Officer, TAME Chapter _____ Date _____

Received & Approved, State Office _____ Date _____

FOR STATE OFFICE USE ONLY

Class	Income Account	Expense Account	Amount	Check number	Mailing Date



DEPOSIT DIRECTION: CHAPTER FUNDS

Chapter Name: _____

Donor Name: _____

Donor Address: _____

Donor Phone: _____

Donation Amount: _____

Check Number: _____

Donor specified restrictions on use of funds (Use for scholarships, Trailblazer visits, etc.):

Were these funds awarded in response to a grant proposal?

(Enter n/a or leave blank if donor did not specify how funds were to be used)

How does the chapter wish to allocate these funds?

- To purchase Comic Books
- To schedule Trailblazer visit to local school/event
- To purchase supplies for local TAME Club (Trailblazer Club)
- For local Math and Science Competition
- For local Scholarships
- For planning meeting
- Other local/chapter/regional program (Please describe)

Description/Notes/Comments

Signature of Authorized Officer, TAME Chapter Date

Received & Approved, State Office Date

FOR STATE OFFICE USE ONLY

Class	Income Account	Amount	Check number	Deposit Date	Donor Acknowledgement