



BARONY OF DARKWATER CHECK REQUEST

Date: _____

Please issue Check to (print) _____

Address: _____

In the amount of : \$ \$ _____

Requested by: _____

Please Print MUNDANE NAME

// SCA NAME:

Contact EMAIL or PHONE: __exchequer@baronyofdarkwater.org

What is Check for?

APPROVED BY:

SENESCHAL: _____ / _____ DATE: __/__/18__
Print MUNDANE NAME / SCA Name

EXCHEQUER: _____ / _____ --- DATE: __/__/18__
Print MUNDANE NAME / SCA Name

If over \$100, additional approval is needed:

APPROVED BY:

BARON _____ / _____ DATE: __/__/18__
Print MUNDANE NAME / SCA Name

OR

BARONESS _____ / _____ DATE: __/__/18__
Print MUNDANE NAME / SCA Name

Amounts over \$500.00 need the approval of the Financial Committee.

I hereby acknowledge receipt of Check No. _____ for the purpose indicated above.

I accept responsibility for the appropriation of receipts, or receipts and cash, totaling \$ _____ amount.

SIGNATURE: _____ Print Name: _____ DATE: _____/18__