



Incorporated 1943

**SEATTLE POLICE ATHLETIC ASSOCIATION
FUNDS REQUEST**

TEAM OR COMMITTEE MAKING REQUEST: _____

PURPOSE FOR REQUESTED FUNDS: _____

AMOUNT REQUESTED: _____ **DATE OF REQUEST:** _____

BILL OR RECEIPT ATTACHED **BILL OR RECEIPT TO BE FORWARDED IN 7 DAYS**

REQUEST THAT CHECK BE MADE OUT AND SENT TO: _____

REQUESTED BY: (name): _____ **PHONE:** _____

ADDRESS OR SPD ASSIGNMENT: _____

I certify that the funds requested are being used solely for the purpose(s) stated. I further certify and agree that if the Board of Directors of the Seattle Police Athletic Association determines, for whatever reason, that these funds were used for any purpose in conflict with standing rules of the best interest of the Association or its members, I will accept responsibility for the immediate repayment of these funds.

SIGNED: _____ **DATE:** _____

(do not write below double line - for office use only)

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REVIEWED AND APPROVED FOR PAYMENT BY: _____

DATE OF APPROVAL: _____ **BUDGET CATEGORY:** _____

DATE: _____ **AMOUNT:** _____ **CHECK #:** _____

NOTE: All requests MUST be approved by a COMMITTEE CHAIRPERSON prior to receiving payments. See back of form for current CHAIRPERSONS.