

RUSHMORE HOCKEY ASSOCIATION
Check Request Form

Date: _____

Payable to: _____

Address: _____

Address: _____

Amount of Check: \$ _____

Reason for Check: _____

Requested By: _____

Approved By: _____

PLEASE ATTACH ALL RECEIPTS AND GIVE FORM TO TREASURER- PO BOX 832,
RAPID CITY, SD 57709.