

WHITBY FC (FOOTBALL CLUB)



LTPD / Competitive / OPDL Cheque Request

Note: Covers Festival, Tournament or Team Expenses

Team Name	_____	Request Date	_____
Coach Name	_____	Manager Name	_____
Requested By	_____	Payable to	_____
Amount Requested	_____		
Description of Need	_____		

Festival or Tournament Name	_____	Date of event	_____

Office Use			
Invoice #	_____	Amount	_____
GL Account	_____	WhitbyFC Chq#	_____
Date Posted	_____		_____
Approved By	_____	Signature	_____

Submit your completed form to executivedirector@whitbysoccer.com