Check or Reimbursement Request Print all information & attach receipts or quotations.

| | Date: | |
|--|-------------------------------------|-----------------------|
| Requestor: | Payee: (If different) | |
| Address: | Address: | |
| Explanation | Budget Area Charge | ed Amount |
| | | |
| | | |
| | | |
| | | |
| | T | otal: |
| Lodge Approval: | Da odge Chief | te: |
| INDIAN WATERS COUNCIL | BOY SCOUTS OF AMERICA | |
| CHECK RE | EQUISITION | |
| Please draw a check payable to: | Date: | |
| Mail to: (If different) | | |
| Explanation | Account to be Charged | Amount |
| | Order of the Arrow 1-2371-000-00 | \$ |
| Requester's Signature Lodge Adviser, Associate Lodge Advisor, Finance Adviser, or Staff Adviser | Approved | Executive or Designee |

Revised: 20230221