

## CARLSBAD HNRC FOUNDATION

## **Check Request Form**

eMail to: tjappleg8@gmail.com

Tom Applegate • m760.310-8490

Payee:	Tom Applegate	Date	: 2/20/2025   11:44 PST
Amount:	\$ 22\$X00X \$275.00 Increased by \$50.00 for 4th place	Date Needed	l:
Address:	contestant.		2/24 4th contestant was a os show, money \$50 return-
		<u>02/21                                   </u>	d by Zelle.
Requested b	y: Maureen Taylor		cusigned by: When Taylor A13432D980458
Request Approved by (Service Director):			
, ,,	Name: Julie Gibbs	DecuSigned by:	
	Signature:	Qulie Gilblas	2/20/2025   2:48 PST
	President's Approval:	cusigned by:—A6E20231DAC64E8  LYN ANDERSON  B234E36F774C2	VELYN ANDERSON
Classification (check boxes):			
☐ Budgeted ☐ Not budgeted (contingency funds)			
<ul> <li>□ Community Service</li> <li>□ Vocational Service</li> <li>□ Vocational Service</li> <li>□ Youth Services</li> </ul>			
Purpose of Check/Comments:			
Cash Prizes for CHS speech competition			
Invoice or receipt attached: $\square$ Yes $\square$ No (will exchange for check)			
Forward check to:   □ Deliver to Requestor □ Mail to Payee □ Zelle® Account:  (consider phone number)			