

**STAPLES SERVICE LEAGUE OF BOYS
(SLOBs)**

Check Request/Deposit Form

Mail completed form to the Treasurer for processing. Address envelope to Matthew and Nikki Ambrifi, SLOBs, 13 Burnham Hill, Westport, CT 06880. Cash must be delivered in person.

**CHECK
REQUEST**

Important: An invoice or receipt must be attached to this form. SLOBs does not reimburse any sales tax. SLOBs is a tax-exempt organization and should not be charged sales tax. SLOBs' tax ID number (Town of Westport – Board of Education) is : **06-6002128**.

Requested by: _____ Date requested: _____

Phone number: _____ Date to be paid: _____

Check payable to:

Name:

–

Address:

City/State/Zip:

Memo/Description of Expense (invoice or receipt must be attached): Amount \$\$

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL DUE

\$ _____

DEPOSIT

FORM

Name: _____ Date: _____

Phone number:

Description of Deposit:

Amount \$\$

CASH: \$ _____

CHECKS: \$ _____

TOTAL \$ _____