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**I.A.H.A. Cheque Request Form**

**Payee Details**

**Name:**

**Address:**

**Payment Details**

**Date Form Submitted:**

**Name of Person Submitting:**

**Signature:**

**Approved By:**

**Print Name:**

*(Must be approved by and Executive Officer with Signing Authority)*

**Receipts Attached (Initials)**

|  |
| --- |
| ***For Treasurer’s Use Only*****Cheque No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |