



Department of Rec Sports Request for Extension of Credit

Today's date: _____

NAME OF REQUESTOR: _____

Name of organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____ Phone: _____

Type of organization: _____

Reason for request: _____

Signature of requestor: _____

(this section for use by Department of Rec Sports staff only)

| Invoice # | Description | Quantity | Price | TOTAL |
|-----------|-------------|----------|-------|-------|
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TOTAL AMOUNT OF CREDIT REQUESTED: _____

Credit limit: _____ Current Balance: _____

Approved by:
Dennis Corrington, Director

Date:

Denied by:
Dennis Corrington, Director

Date:

Routing: Original to Arranna Jakubik _____
Copies to Connor Heim _____
Tawyna Bomnskie _____