## SAF/CAF Check Request

Requested by: Christina Moreno						107 20HOS	
y to the Order of: Christina Moreno						Bid #:	
Address:						Amount: 359.54	
City:	State: Zip:						
Re:[	Reimbursement fo	or Rocketry supplie	s/parts	Invoice #	817568808702ZZE	Invoice Date: 01/26/1	7
Attention:				Account #	<b>‡</b>	Check Mailed Or	ı
						Return to Sponsor	,
	••	G.1	<b>A</b>	Function	Ohisat Cada		
Category ants- Rocketry	y Name	Category # 865-872GRA	Amount 359.54	<b>Code</b> 36	Object Code 6399		
fice Use Only:	Check	# 40%62	A21C	Date	1.26.	17	