SAF/CAF Check Request

Requested by:	Christina Moreno						A K. V.	
y to the Order of:	e Order of: Christina Moreno						Bid #:	
Address:							Amount: 282.47	r
City:	State: Zip:							
Re:	Reimbursement fo	r Rocketry supplie	s/parts		Invoice #	00568425500JFL	Invoice Date: 01/30/	17
Attention:					Account #		Check Mailed Or]
Catalaga	Nama	Catagoriu #	Amount		Function Code	Object Code	Return to Sponsor	j
Categor ants- Rocketry	y Name	Category # 865-872GRA	282.47] [36	6399		
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				1				
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fication Only:	Chack t	40862	0277		Date	2.1.	17	