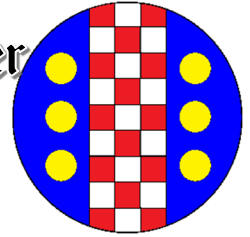




# Kingdom of the Outlands • Office of the Exchequer



Email: [exchequer@outlands.org](mailto:exchequer@outlands.org) • <http://www.outlands.org>

## REQUEST FOR FINANCIAL WARRANT

**Branch:** \_\_\_\_\_

This form should be completed by the individual who is applying to be \_\_\_\_\_ (position) and signed by the nominator (either the current Seneschal/Exchequer, outgoing Exchequer, or the Guild principal if a chartered Guild).

**Legal Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City: State: Postal Code:** \_\_\_\_\_

**Phone & E-mail address:** \_\_\_\_\_

**SCA Name:** \_\_\_\_\_

Please find attached: Copy of SCA membership card. (If accepted by the KCoE and TRM as Exchequer, a copy of Driver's License or other Government picture ID will need to be sent. SFP Sec II, B.)

*I understand that by applying for the position of \_\_\_\_\_ of the above listed branch of the Society for Creative Anachronism, Inc., I agree to assume full responsibility for all financial affairs of this branch upon confirmation of my appointment to the office by warrant. These responsibilities include: maintaining membership in the Society for Creative Anachronism, Inc.; complying with Society, Kingdom, and this branch or guild's financial policy requirements; submitting reports when they are due according to Kingdom Policy and this branch or guild's requirements; making myself available to the membership of this branch or guild for consultation and reimbursements; and being a part of this branch or guild's financial committee.*

**Legal Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Complete this form, make a copy for your files, and send to the Kingdom Exchequer along with the required copies of personal identification. If you do not hear from the Kingdom Exchequer within 30 days, please call to see what is delaying your warrant



**Nominator:** [  ] Current Seneschal/Exchequer **-or-** [  ] Outgoing Exchequer

Recommendation: *I recommend the above individual for consideration as the new \_\_\_\_\_ for our branch, and if possible, will assist in training him/her for the office*

**Legal Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_