

## CHEQUE REQUISITION FORM

<b>Name</b>	
<b>Signature</b>	
<b>Date</b>	
<b>Cheque Payable to</b>	
<i>(if different from above)</i>	
<b>Email address</b>	
<i>(you will be notified via email when your cheque is available for pick up in the office)</i>	

If requesting reimbursement (or submitting receipts to clear an advance), please attach original receipts to substantiate your claim:

	\$	
	\$	
	\$	
	\$	
<b>TOTAL</b>	<b>\$</b>	

Approved by	1.	
	2.	

### TREASURER'S USE:

<b>Date Received</b>	
<b>Cheque Issued</b>	
<b>Cheque Amount</b>	
<b>Cheque Number</b>	
<b>Mailed/Delivered</b>	