



Expense Report / Check Request

Name _____ Date _____

Reason for Expense:

Amount Requested: _____

Make Check Payable To: _____

Check this Box if Team Credit Card was used

DON'T FORGET TO ATTACH RECEIPTS TO THIS FORM

(receipts must be attached for all requests, whether the card was used
OR if a check is being requested)

Expense Approved By _____ Date _____

DO NOT WRITE IN THIS BOX - For Treasurer Use Only:

Check Received Date _____ Check Number _____

--- OR ---

Verified on Credit Card Statement _____