

Calgary Unitarians

**EXPENSE CLAIM/CHEQUE REQUEST**

Date: \_\_\_\_\_

Full Name of Requester: \_\_\_\_\_

Cheque made out to: \_\_\_\_\_

Disposition of Cheque:      Name of mail slot: \_\_\_\_\_

Or: Address: \_\_\_\_\_

DATE	Cost	GST	Total	Description	Committee/Budget Line
Totals					

Total for cheque: \_\_\_\_\_

Requestors Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

**Receipts attached.**

Approved by: \_\_\_\_\_

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Position: \_\_\_\_\_