American Library Association, New Members' Round Table (NMRT)

Check Request Form

Instructions:

1. This form must be completed and submitted by August 1 for expenses incurred during the fiscal year.
2. Fill out this form completely. All questions must be answered. Please print clearly.
3. You will need to contact the NMRT Treasurer (nmrt.treasurer@gmail.com) for the correct account number.
4. If you have any questions about completing this form, please contact the NMRT Treasurer.
5. Make two (2) photocopies of both the completed form and any receipts, quotes, or other supporting documents.
6. Mail and file as indicated:

Mail original form and original docs to:	**Mail 1 photocopy of form and docs to:**	**Keep 1 photocopy of form and documents for your records.**
Kim Sanders HRDR American Library Association 50 E Huron St Chicago, IL 60611-2729	Amy Ferguson, NMRT Treasurer Library Richland College 12800 Abrams Rd. Dallas, TX 75081	

Information about the person (You) completing this form (Requestor):

Requestor Name

Are you a: __ Board Member

__ Committee Chair

__ Committee Member

Committee or Office Name

Supervising Officer Name

Justification/Description of Payment:

Requestor Signature

Date

Information about the payment and the person or company receiving check (Payee):

Is this check request for a(n): __ Advance

__ Reimbursement

___ – ___

Payee Social Security Number (required when payment is made to a person)

Payee Name

Payee Mailing Address:

Street Address

City, State, ZIP Code, Country

Payee Home Address (required when payment is made to a person):

Street Address

City, State, ZIP Code, Country

607 – ____ – ____

Account Number (You must contact the NMRT Treasurer for this.)

$

Check Amount

Rev 2/2008